

Report to the Governor and Legislature
December 15, 2008



Washington State Department of
Early Learning

Introduction

The Washington State Department of Early Learning (DEL) is pleased to deliver this report on some of the vital work of our young agency. Since DEL's creation in July 2006, we have laid a strong foundation for raising the quality of child care and the state's preschool program. We are confident that we've strengthened both the safety in and the reach of early learning services, implemented a continuous quality improvement plan, expanded our Early Childhood Education and Assistance Program by 37 percent, and set forth a five-year strategic plan to guide all our efforts.

Thanks to your support, and the advice of our Early Learning Advisory Council, we have also had the opportunity to begin weaving together the fragmented services, programs and initiatives that make up early care and education in Washington. We present this report on: our quality rating and improvement system; kindergarten assessment processes; a child care consultation pilot program; and preliminary work completed on the proposed alignment of state and federal preschool programs. These subjects are presented together in one report intentionally; our hope is that every conversation about early learning moves us closer to our state's goal of having a cohesive, comprehensive system that ensures *all* children's success in school and life.

This report is the culmination of intensive work by DEL staff, public and nonprofit partners, Tribal Nations, the University of Washington, community and technical colleges, consultants, and community members. Most importantly, it reflects the voices of thousands of Washington parents and citizens who share the passion and the accountability for helping our children every day. DEL is honored to have completed this report with the assistance and input of so many. We are optimistic that even in the current economic climate, information contained in this report will help ground decision-making now and well into the future.

Sincere regards,



Jone M. Bosworth
Director

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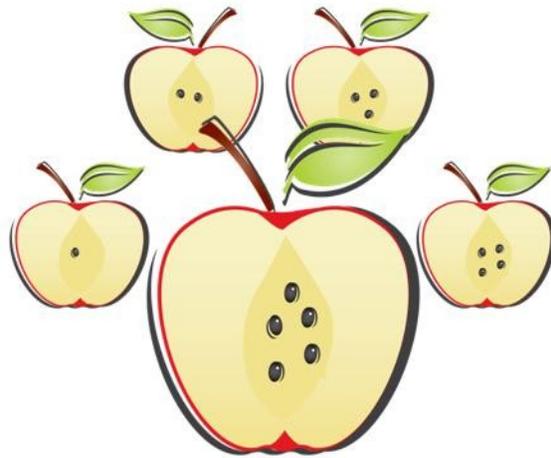
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Seeds to Success

Quality rating and improvement system



INTRODUCTION

If just one word could sum up the design and testing of a voluntary quality rating and improvement system (QRIS) in Washington, it would be “learning.”

- Learning how communities would use the resources and infrastructure they currently have to support a field test of the QRIS model.
- Learning what QRIS model best reflects the needs of families, children and child care providers in our state and how to test it.
- Learning how best to communicate about this work in a clear, meaningful way to a broad array of interested parties: parents, legislators, child care providers, early learning advocates and media.

This section is intended to provide a broad overview of the work done by the Department of Early Learning (DEL) and communities to design and field test a QRIS model. It is our hope that this information will provide the Governor and Legislature with the information they need to make policy and budget decisions. It is also our hope that this report reflects the incredible amount of energy, best thinking and collaboration that went into the design and testing of a QRIS for Washington.

While the tough economic times in our state and our nation have required DEL to suspend the field testing of this model in order to preserve programs and services already in place that are directly provided to children and families, there has been incredible progress in our state on QRIS design. We are well-positioned to continue this work in better budget times.

DEL has approached this work with the ultimate goal of **improving school readiness for Washington children**. Certainly a QRIS would improve professional development opportunities for child care providers by serving as an “organizing tool” for the many fragmented professional development systems and programs offered around our state. However, at the heart of our work has been a guiding belief that investing in a QRIS in Washington is a way to ensure parents have more information about child care, and more children—including our most vulnerable children—have access to child care that offers rich early learning environments that go beyond the state’s minimum health and safety regulations. In short, environments that help prepare children for kindergarten.

Implementing a QRIS in Washington was a key recommendation in Governor Chris Gregoire’s Washington Learns report, with an expected result that *“children will be better prepared to succeed in school and life.”* The Legislature funded the design and field testing of a QRIS in the 2007-2009 biennial budget. DEL took the lead on this work, in collaboration with our nonprofit partner Thrive by Five Washington (Thrive by Five), and several pilot communities around the state.

It has been a challenging and rewarding process. The Legislature made clear its expectation that DEL would design and test *one* model statewide. DEL approached the design of our state's model in a research-based, inclusive way—using “lessons learned” from states that already have designed a QRIS, national and state research on child development and quality child care, work already completed in Washington by the Early Learning Council's QRIS Technical Advisory Committee, and the input of pilot communities that were well-positioned to inform us of both the needs and existing capacity in their area.

Designing a model that incorporated all the available information and preferences was a process that took time and intense collaboration. Ultimately, we designed *one* statewide model, which we named “Seeds to Success,” with six communities: Clark County, Kitsap County, Pierce County (privately funded), Spokane County, and the neighborhoods of White Center and East Yakima as defined by Thrive by Five. In White Center and East Yakima, which are Thrive by Five demonstration communities, the plan was to field test the model with a higher level of incentives for providers than in the three non-Thrive by Five communities.

This section will highlight the challenges, successes and lessons learned as Washington designed and began the field testing of a QRIS. The field test year was to have run through June 30, 2009, with a baseline evaluation conducted by DEL and the University of Washington Human Services Policy Center and Center on Infant Mental Health & Development. This baseline evaluation would yield valuable information about how the model worked, whether the financial incentives and support offered appeared to be adequate, and how parents were involved in the QRIS. The groundwork is laid to continue both the field testing and evaluation in better budget times.

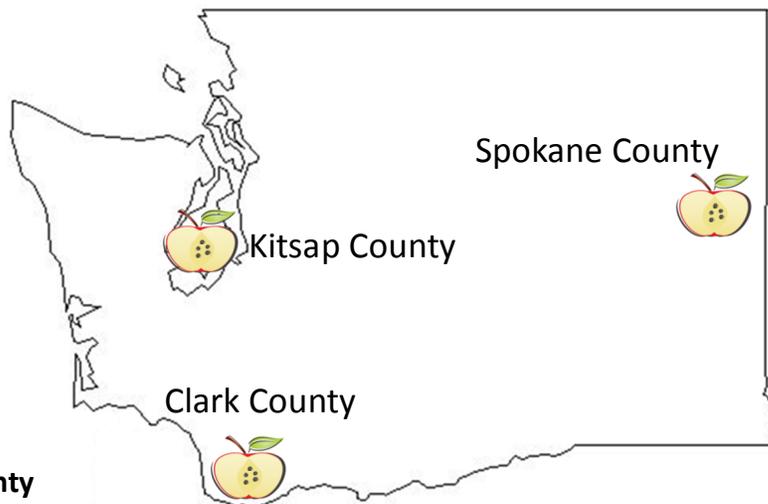
Design Phase (August 2007 through June 2008)

The 2007 Legislature included in the 2007-2009 biennial budget \$4.7 million for DEL to design and field test a QRIS. A total of \$650,000 of this was earmarked for the first year to design a QRIS model, with the remainder to be used during the piloting or “field testing” of the model. The Legislature designated four counties to be part of the process: Kitsap County, King County, Spokane County and Yakima County. DEL wanted to ensure statewide geographic representation in the building of a QRIS and strategically selected a fifth county, Clark County, based on the high quality of its competitive proposal.

During this design phase, more than 3,000 Washingtonians in the six communities—including parents, child care providers and others—provided input, ensuring a truly collaborative process that yielded a QRIS model that represents the needs and preferences of our state. We realize more would be learned with testing of the model.

Snapshot of children living in three field test counties

(Because the two Thrive communities are neighborhoods as defined by Thrive by Five Washington, and the other three communities are county-wide, it is difficult to capture comparable data on children living there. Details on the Thrive by Five communities can be found in the August 2008 report Better Beginnings: The State of Early Learning and Kindergarten Readiness in East Yakima and White Center, available at www.thrivebyfivewa.org.)



Spokane County

Head Start slots: 879

ECEAP slots: 740

Children under age 5 living in poverty: 16,340

Children receiving free or reduced price lunch: 40% of children in county

Children receiving child care subsidies: 6,738

Children enrolled in kindergarten: 5,149

Full-day kindergarten: 15 programs with 1,057 students (20.5% of kindergartners)

Kitsap County

Head Start slots: 518

ECEAP slots: 190

Children under age 5 living in poverty: 6,416

Children receiving free or reduced price lunch: 28% of children in county

Children receiving child care subsidies: 1,145

Children enrolled in kindergarten: 2,609

Full-day kindergarten: 4 programs with 316 students (12% of kindergartners)

Clark County

Head Start slots: 542

ECEAP slots: 385

Children under age 5 living in poverty: 11,796

Children receiving free or reduced price lunch: 36% of children in county

Children receiving child care subsidies: 3,199

Children enrolled in kindergarten: 5,281

Full-day kindergarten: 7 programs with 562 students (10.6% of kindergartners)

Overall, communities validated that our current system for early care and education is a fragmented system, giving the state an opportunity to use QRIS as an organizing tool to help bridge some of the identified gaps and provide better information for families, providers, and child care facilities.

DEL was able to find some common themes across the communities that were used in building the QRIS model. This valuable information builds upon the Parent Needs Assessment DEL delivered to the Legislature in October 2008:

- Many resources and opportunities for sharing information with parents exist in communities, although they are often underused: public libraries; schools; health departments; local media; and statewide programs such as DEL, the Women, Infants and Children Program, and child care resource and referral agencies.
- The capacity to gather counts of early learning programs, educators and children served is limited in all communities.
- No communities had a thorough, data-based, community-wide evaluation of the availability of quality early learning programs.
- The capacity of each community to track education levels among child care providers and teachers is limited in all communities.
- Each community ranked the relationships between early learning and K-12 programs in their areas as *average or below average*, although they did identify many opportunities for enhanced linkages between early learning and K-12 programs.
- Communities cited State Training and Registry System (STARS) training, community and technical colleges, and child care resource and referral agencies as the professional development opportunities most frequently used.
- Communities identified numerous local communication efforts for early learning educators and families, namely: newsletters, Internet-based communication, media or public awareness efforts, meetings and gatherings, workshops/training events, and information sharing during service delivery.
- Communities cited the following additional resources needed to implement a QRIS:
 - Adequate and system-wide funding
 - Education and training opportunities including mentoring and coaching
 - Supports for early educators including compensation, substitutes, scholarships, materials and facilities incentives
 - Effective communication and coordination
 - Technical resources including cultural relevancy, site assessments, data and technical support

With this information in hand, community coordinators gathered information from their communities to inform their pilot design reports, which were due to DEL on May 15, 2008, for DEL to use as a key resource in informing the design of a QRIS model. The communities were charged with submitting a report that included input from a diverse groups of parents,

educators and child care providers, and other learning professionals in their area.

In the end, more than 3,000 Washington parents, providers and others in the six pilot design communities offered input into the design of our state's QRIS model. The final design reports are available on DEL's Web site at www.del.wa.gov.

Building the model

DEL rolled out its model in May 2008, which was designed based on:

- The community design phase input—environmental scans and final reports
- Previous work in Washington, including the Washington Learns Early Learning Council's QRIS Technical Advisory Committee
- "Lessons learned" from quality rating systems from around the nation
- Research on elements that link to positive child outcomes
- Preliminary results from DEL's 2008 Parent Needs Assessment
- Licensing standards in Washington, and evaluative reports on state licensing systems
- Quality standards from accrediting bodies (the National Association for the Education of Young Children and the National Association of Family Child Care)
- Quality standards from our state-funded pre-kindergarten program, the Early Childhood Education and Assistance Program (ECEAP)
- Discussions with and publications from the National Child Care Information Center
- Discussions with the BUILD Initiative and other national experts

DEL considered the following questions when building the QRIS model:

- What does success really look like for Washington children?
- Are the levels in the QRIS model meaningful for educators, and can educators achieve higher quality levels in a timely manner?
- Do the quality standards within each level reflect our goals for children, families and educators?
- Are we creating a "system of attraction" that ensures child care providers will want to participate?
- Are the quality levels measurable?

Research tells us that safety is the foundation of child care quality. DEL approached the design of the QRIS model knowing that Washington already has among the strongest child care licensing regulations in the nation for ensuring health and safety. In March 2007, the National Association of Child Care Resource & Referral Agencies ranked Washington fourth in the nation for child care center regulations (www.naccrra.org/policy/docs/scorecard/Scorecard.pdf), and in January 2008 ranked Washington second in the nation for family home child care regulations (www.naccrra.org/docs/FCCreport-rankings_06b.pdf).

DEL released a solicitation of interest on August 1, 2007, to encourage communities within the legislatively mandated counties to work together on one design pilot proposal each that drew upon local strengths and expertise rather than submit competing proposals within counties. DEL issued a request for proposals (RFP) on August 7, 2007. The RFP required communities to describe their ability and capacity to participate in the design of a QRIS. By the deadline of October 1, 2007, DEL received eight proposals from the following communities:

- Clark County
- Spokane County
- White Center
- East Yakima
- Kitsap County
- Pierce County
- Wenatchee
- Benton-Franklin counties

DEL held a bidder's conference on October 8. Following that, DEL convened a panel of evaluators to review and score the proposals. The panel included representatives from the Office of Superintendent of Public Instruction, higher education, early learning stakeholders and DEL staff members.

The panel of evaluators selected:

- Olympic Educational Service District 114 (Kitsap County)
- Washington State University Spokane (Spokane County)
- Educational Service District 112 (Clark County)
- White Center (Thrive by Five early learning demonstration community, King County)
- East Yakima (Thrive by Five early learning demonstration community, Yakima County)

Demonstrating the great amount of statewide interest in designing a QRIS, Pierce County (which submitted a proposal but was not selected by the panel) asked to participate in the design phase as a privately funded community. Tacoma-Pierce County Child Care Resource & Referral, United Way of Pierce County and other entities joined together to raise the funding to participate in the design phase.

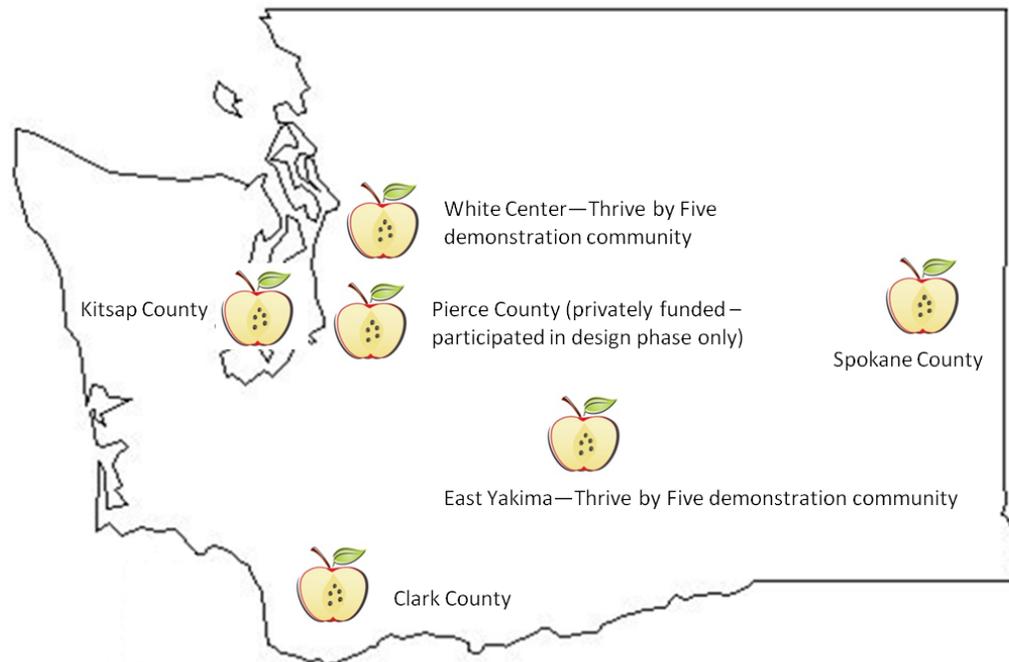
To organize the work of designing a QRIS model, DEL required communities to begin by conducting an "environmental scan" of their area that demonstrated existing capacity, resources and infrastructure in several domains:

Educators and early learning programs—Existing programs and educators within the community; availability and quality within those programs; level of education and professional development among educators; and supports needed by licensed child care providers.

Information sharing with parents—Opportunities for information sharing with parents; information desired by parents; and use of information resources by parents.

K-12 linkages with early learning—Availability of and plans for full-day kindergarten programs; relationships between early learning and K-12 programs; and communication and sup-

Seeds to Success pilot communities



port for early learning educators and families in their relationships with K-12 programs.

Professional development and education/organizations/institutions—Use of professional development opportunities available to early learning providers; local impact of current professional development and educational opportunities on quality of early learning programs; and linkage of professional development and educational opportunities to early learning and K-12 programs.

Community and potential partnerships—Organizations and stakeholders involved in current early learning partnerships; communication and support for early learning educators and families; and potential partnerships to support a QRIS pilot and system planning effort.

Project approach/methodology—Resources available to bring together parents, early educators, administrators, school systems, business interests and broader community representatives to collaborate on the design and implementation of QRIS; additional resources needed to create a system for successfully implementing the QRIS; infrastructure currently in place to prepare for and implement the QRIS; strategies most effective for preparing for, implementing and evaluating the QRIS in communities; and methods that would be most beneficial for evaluation.

These environmental scans yielded a vast amount of data that helped paint a picture of capacity and needs in the communities. Some communities used surveys, while others used interviews or group discussions. Communities also answered several open-ended questions. Unfortunately, despite communities' best efforts, information about actual numbers of early learning programs, educators and children served continues to be incomplete, causing large data gaps in the environmental scans. DEL does house information on licensed child care in each of the counties; however, there are other care options that may be license-exempt.

DEL strived to build a QRIS model that acknowledges and builds upon our state's strong child care licensing health and safety standards. The first quality level in the model requires facilities to be licensed by the Department of Early Learning or certified by a Tribal Nation; to care for young children (not only school-aged children); and to have a current license that is not revoked or suspended. Subsequent quality levels build upon the foundation of safety and health to ensure rich early learning environments for children.

Our QRIS model focuses on four areas:

- **Curriculum and Early Learning Environment:** Environment of the facility, curriculum and activities, documentation on children's progress, staff-to-child interactions, behavior guidance, language and literacy.
- **Professional Development and Training:** Training and education levels of staff, experience as a child care provider.
- **Family Relationships and Community Partnerships:** Parent relationships, parent involvement, connecting to community resources, use of data to inform facility, connections to local schools.
- **Management Practices:** Facility business plan, staff planning time, business practice, employee review, staff compensation.

These four categories of quality are some of the most common areas that are reviewed in other quality rating systems around the nation.

DEL chose to build one model that included both family home child care providers and child care centers. This decision was based on:

- The knowledge that there are universal elements of quality, whether care is provided in a family home or a center.
- The communities' desire for a model that was simple and easy to navigate.
- The belief that family home and center providers must all meet the same high quality standards and therefore should have the opportunity to receive the same incentives. Family homes often serve fewer numbers of children, and most of the incentives in the model are divided into two payment amounts for either small or large facilities. However, many of the model requirements are costly: health insurance for staff, lower ratios and even liability insurance. These are high-cost items regardless of the number of children served.

In designing the model DEL focused particularly on elements that promote healthy social and emotional development in children. This is aligned with DEL's state-funded pre-kindergarten program, ECEAP, which also focuses on social and emotional development through the use of the Devereaux Early Childhood Assessment Program (DECA).

The Seeds to Success model is included as Appendix A-1 of this report.

This decision is also aligned with what research tells us is most important to Washington parents when getting their children school-ready. According to DEL's 2008 Parent Needs Assessment, Washington parents ranked skills related to social and emotional well-being—including how to get along with other children and control emotions and behavior—as their top priority for skills they want their children to learn in preschool or child care. Parents ranked these skills above cognitive and general knowledge skills such as knowing the alphabet, colors and shapes.

The Curriculum and Early Learning Environment area specifically addresses the critical importance of healthy social and emotional development. It includes elements that research shows are valuable components of social/emotional growth, namely staff-to-child interactions and behavior guidance. Research shows that one of the most important factors in raising overall child care quality is the specific interactions between educators and the children they care for. DEL emphasized other critical research-based concepts identified by communities as important: the importance of parent involvement, professional development opportunities, and curricula and activities that encourage learning through play and cultural awareness.

How the model would work

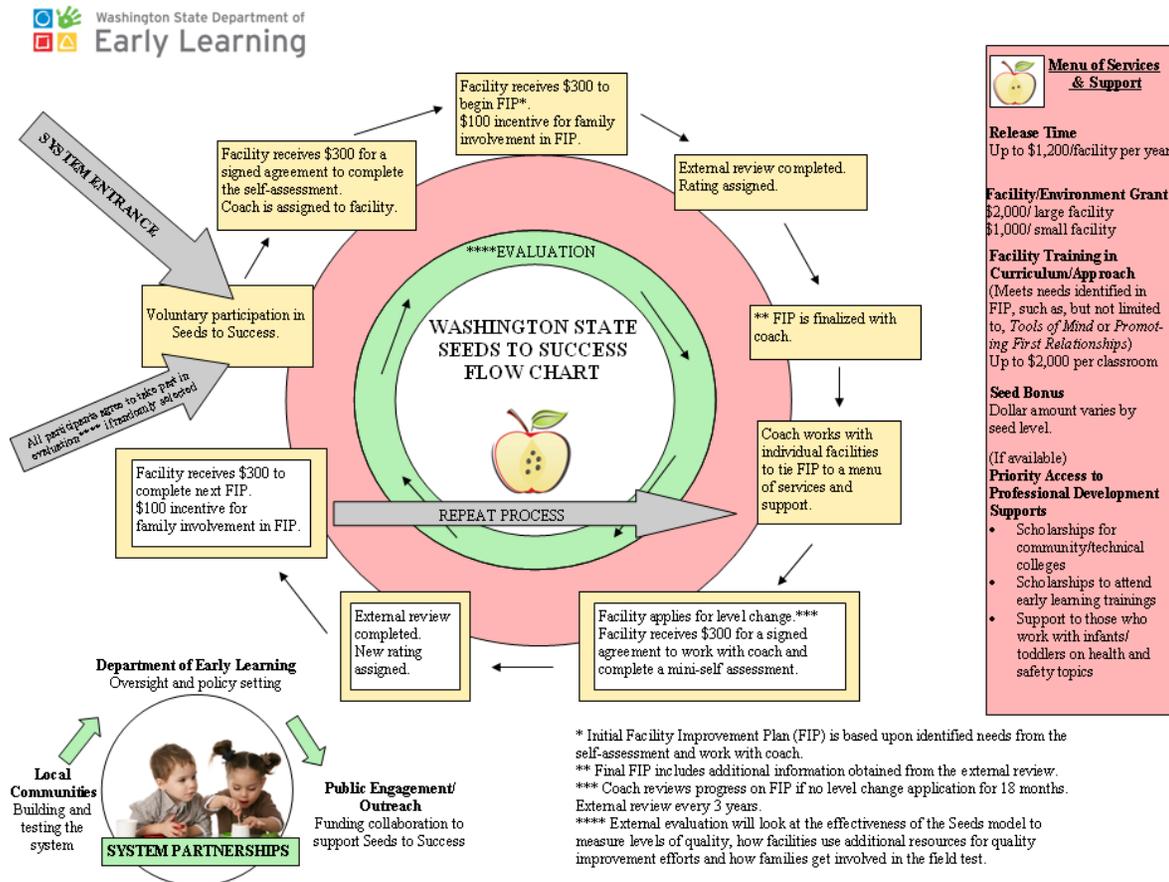
If DEL had been able to field test Seeds to Success, providers who chose to participate would have access to a variety of supports and services embedded in the model. Providers would be assigned a coach who works with the provider to create a facility improvement plan that guides the provider's quality improvement efforts.

Providers also would receive financial incentives at key "milestones" during the quality improvement, including agreeing to complete a self-assessment and completing the facility improvement plan. Providers also would have access to a menu of supports and services, including funding for release time for staff to do their assessment and planning, seed financial bonuses and facility/environment improvement resources.

Another key incentive in the menu of services is priority access to DEL-funded professional development opportunities, including Healthy Child Care Washington, Washington Association for the Education of Young Children Scholarships, Building Bridges to Higher Education and Washington Scholars. Priority access does not mean current participants are removed from any programs, but Seeds to Success participants would have priority access as capacity allows.

Because DEL believes parents are their children's first and most important teachers, the model requires and supports parent involvement in quality improvement efforts. Providers would receive funding to involve families in the creation of their facility improvement plan, to be used in a way the provider believes works best for the families. And, of course, an entire area of the model is devoted to parent relationships and involvement.

Seeds to Success flow chart



To determine a provider’s initial quality rating, an independent team of reviewers would visit the facility and review its quality based on documentation and observation. The reviewers would submit a report and rating recommendation to DEL. Based on this information, an internal team of DEL staff (independent from our child care licensing staff *) would assign a quality rating of one to five seeds to the facility. That rating would be shared with the provider, but not be made public during the field test year. That decision is discussed more in depth in “Field Test Phase.”

* It is important to note that in their final reports, all six communities involved recommended that child care licensors be separate from the QRIS rating and technical assistance. In Pierce County, some community members felt that licensors could identify and rate quality, but most respondents felt that reviewers should be independent of licensing. In Spokane County, provider workgroup and advisory team participants agreed licensors should have some role in the QRIS structure to assure cross communication between the system; however, both groups recommended licensors not conduct rating reviews.

Rolling out the model

Once DEL completed its work building the model based on the input of thousands of Washingtonians, research and other information, the model was shared with communities. DEL brought together the QRIS communities on May 23, 2008, to review the model and ask questions. Present at the meeting were representatives from each community, as well as from Thrive by Five, the Governor's policy office and legislative staff. At this meeting, communities sought clarity on a number of aspects related to the model:

- ***What do we call the model?*** While DEL had not yet named the model (various other states have named their QRIS to promote brand recognition and marketing), we had chosen to build the rating on “quality blocks” as depicted by the child’s building blocks in DEL’s logo. Some communities stated that using the term “block” connoted a barrier. This was echoed later in June when DEL presented the model to its Early Learning Advisory Council, and in an independent review of the model by a leading QRIS expert, Karen Ponder (her review is discussed more in “Field Test Year”). DEL subsequently changed the name and imagery related to the model, which will be discussed in the “Field Test Year” section.
- ***How many models were there?*** Thrive by Five, with its two demonstration communities, had designed its own QRIS models, which it called “Steps to Thrive,” prior to the Legislature passing the requirement for DEL to develop and pilot a QRIS (that happened during the 2007 legislative session). These models—one for family home providers and one for child care centers—were disseminated in some communities. The Legislature made clear its expectation that *one* model would be tested in our state, and DEL and Thrive by Five met to finalize the work that would align and weave together key elements from the models into one state model.
- ***Why was there a requirement to use Tools of the Mind as a research-based curriculum training tool?*** Community representatives expressed concern about DEL prescribing *one* tool to be used for training in curriculum and approach. DEL selected that tool because it was research-based, showed positive outcomes with children, and emphasized social and emotional development. DEL subsequently removed that requirement, instead asking providers to select a training that meets the needs identified in the Facility Improvement Plan, such as but not limited to Tools of the Mind or Promoting First Relationships, another research-based approach for working with children ages birth to preschool that matches the needs communities identified as most important.

As a way to meet the various needs of child care providers participating in QRIS, the professional development support incentive helps providers meet their training and education goals either through a curriculum or other proven approach that supports the learning environment. This incentive also could be used to pursue a degree in early childhood education at a local community college. While much work is needed to build a seamless professional development system in Washington, this flexible professional development incentive was designed to allow providers to access training in core child development principles with follow-up from QRIS coaches. This helps ensure that training or college course concepts are applied in effective ways with children in the learning environment.

Additional questions included: Are there sufficient resources to create a “system of attraction” so providers would participate? How will data be collected and analyzed at the community level? What does the coaching model look like? How do we talk in a common way about QRIS?

Following the May 23 community meeting, DEL Director Jone Bosworth sent a letter to the participants capturing the key “take aways” from the meeting and laying out next steps for jumping into field testing and committing to learn together. That letter is included in this report as Appendix A-2.

Because several key questions were not resolved during the May 23 meeting, DEL convened another meeting on June 30 and July 1, during which communities again came together to make final decisions about the model that would be field tested. At this time, a fifth quality level was added to the model in only one area: Curriculum and Learning Environment. This fifth level is related to ratio requirements, so that family home and child care centers have only certain numbers of children with a caregiver.

Also at this meeting, DEL committed to holding at least two town hall meetings on QRIS around the state prior to field testing the model. In the end, DEL built into its contracts with the five communities the requirement that they each hold at least two town hall meetings to inform the public, including parents and providers, about the QRIS model and field test year. Outcomes from these town hall meetings are discussed in the field test phase portion of this report. A complete list of town hall dates and locations is included as Appendix A-3 of this report.

Finally, during the June 30 and July 1 meeting, DEL committed to soliciting an independent review of the model. DEL reached out to Karen Ponder, past president and CEO of the North Carolina Partnership for Children and the Smart Start Initiative, and a nationally recognized expert in developing QRIS. Ponder reviewed DEL’s model, Thrive by Five’s models and the “enhanced model” that incorporated Thrive by Five’s and DEL’s models.

Ponder’s key recommendations were related to simplifying the model so it was easy for parents and providers to understand, and DEL incorporated several of her recommendations into the model and field test. Her full review is included as Appendix A-4 of this report.

It should be noted that due to this collaborative and careful approach to building the model, the final version for field testing was not completed until August 2008. Once the model was completed, DEL worked to get contracts for the field test year in place with all five communities. Contracts were in place with three counties in early October, and the Thrive by Five communities’ contracts were executed in early November.

Field test phase (fall 2008 through June 2009)

Part of the Legislature's charge to DEL was to pilot test the QRIS model after it was designed. DEL calls this the "field test" phase to adequately reflect what is happening during this time. The field test phase is a time to test the model with communities and learn together about what works and what could be improved if QRIS were to move forward in Washington.

Although we've suspended the Seeds to Success field test, DEL is including information in this report about the plan for the field test year to inform future work.

Getting started

Among the first decisions made during the field test year was what to call the model. DEL selected "Seeds to Success," because we believe the seeds to lifelong success are planted in a child's earliest years, and access to high-quality child care is a part of planting those seeds. We selected the apple as the visual symbol of Seeds to Success, both because of its prominence as one of our state's most abundant natural resources, and because apples connote health and well-being. The model is based on a rating scale of one to five apple seeds.

Another decision made at the outset of the field test year was not to publish ratings this year. Providers will be assigned a rating of one to five seeds, and that rating will be shared with them. DEL made this decision along with communities, who felt this was a fair approach for providers who volunteered to help us test a model that might be changed.

Finally, at the outset of the field test phase, DEL created and launched a "Seeds to Success" section on its Web site, at www.del.wa.gov/seeds. This section included information on the design phase, a DEL video about Seeds to Success, a list of the town hall meetings, Seeds to Success application information, a "library" of national QRIS research documents and a media kit for reporters interested in learning more.

Field test budgeting

The budget for the Seeds to Success field test were based on 25 facilities in each of the five communities. DEL committed a minimum of \$350,000 for each of the communities for the field test year, and additional funding was necessary to adequately process and provide incentive payments. DEL was prepared to disseminate more funding based on need and resource availability. According to DEL's contracts with the five communities, this funding was to cover:

- Administrative costs
- Community coordinator salary
- Coach salaries (estimated two coaches per pilot site, more in the two Thrive by Five communities)
- Data collection support
- Equipment that meets criteria mandated by the Institutional Review Board (IRB) for ethical research practice—this is related to the University of Washington evaluation of the field test year, which is discussed later in this section.

- Coordination of content and printing of local menu of services
- Recruitment and outreach
- Parent outreach and communication
- Coach training
- Processing payments to facilities for incentives

Additional costs for the field test year included evaluation of the field test year, facility monitoring and incentive costs (including start-up incentives, professional development support, release time, coach training, facility/environment grants, Seed bonuses for achieving various seed levels), and state governance and community costs.

Communities hired coaches beginning in fall 2008. Some communities elected to hire coaches on a contract basis, while others hired them full time through the field test year. The interest in applying for the coaching positions was intense: Nearly 80 applications were received in the Spokane County community alone. The coaches were scheduled to undergo intensive training in child care licensing, research-based child development, the survey tools to be used during evaluation, the quality standards in the Seeds model, and many other tools and concepts to be used during the field test year.

Application and selection process for the field test

On November 5, 2008, DEL released the application for providers interested in participating in the Seeds to Success field test. DEL strategically decided to create a short initial application for interested providers, so that providers did not feel the application process was burdensome. DEL would have gathered additional data from providers who were randomly selected to participate, through a longer “intake” document. This application was made available in English and Spanish on DEL’s Web site, and the deadline to submit an application was December 1, 2008. This followed the town hall meetings in each of the five communities during which providers, parents and others were able to ask questions and learn more about the Seeds to Success model and field test.

Those eligible to apply included family home and center-based child care providers who:

- Are licensed by DEL or certified by a Tribal Nation
- Care for young children (not only school-aged children)
- Hold a license that is not revoked or suspended

To ensure providers were aware of this opportunity, DEL issued a press release statewide, and DEL staff conducted interviews with key television, radio and print outlets. In addition, DEL asked members of its Early Learning Advisory Council to share the information in their communities, and reached out to the Washington State Child Care Resource & Referral Network for help spreading the word.

DEL tasked the coordinators in each of the five communities with conducting additional outreach and recruiting. DEL provided each community with a “toolkit” of materials to help in this effort, which included:

- A list of licensed child care providers in their communities
- A customized flyer to disseminate in their communities
- A one-pager with suggested marketing strategies
- A print-friendly version of the application in English and Spanish, so community coordinators could help providers who were unable to complete the survey online
- A flow chart depicting the application process and timeline for providers
- A copy of the press release

Two hundred sixty-two child care providers from the five field test communities applied to be part of the Seeds to Success field test. The chart on the following page shows data about those who applied.

Although the work was suspended, DEL “vetted” the applicants to ensure they met the eligibility requirements, then forwarded the applications without identifying information to the University of Washington, which has software needed to randomly select providers. This provides additional data on the providers who applied and who would have been selected to participate. Through the random selection process, we learned that 99 percent of those providers that would have been selected to participate in the field test reported accepting subsidies.

Of the 251 applicants who were eligible, 25 providers were randomly selected in each community to participate, for a total of 125 participants. In the two Thrive by Five communities, the breakdown is six child care centers and 19 family home providers. In the three other communities, that includes 18 child care centers and seven family home providers.

| | Clark County | Spokane County | Kitsap County | White Center | East Yakima | Grand total |
|--|--------------|----------------|---------------|--------------|-------------|-------------|
| Licensed/certified centers in community | 102 | 207 | 73 | 12* | 7* | |
| Licensed/certified family homes in community | 287 | 267 | 165 | 48* | 37* | |
| Number of centers that applied | 36 | 47 | 22 | 8 | 6 | 119 |
| Number of family homes that applied | 39 | 18 | 26 | 30 | 30 | 143 |
| Center applicants screened in as eligible to participate | 34 | 45 | 20 | 8 | 6 | 113 |
| Family home applicants screened in as eligible to participate | 37 | 18 | 26 | 28 | 29 | 138 |
| Eligible applicants reporting they accept subsidies | 67 (94%) | 63 (100%) | 44 (96%) | 36 (100%) | 35 (100%) | 245 (98%) |
| Centers to be randomly selected ** | 18 | 18 | 18 | 6 | 6 | 66 |
| Family homes to be randomly selected ** | 7 | 7 | 7 | 19 | 19 | 59 |

**DEL provided the two Thrive by Five communities with a list of licensed or certified centers and family homes within the county (King and Yakima) in which their respective communities are located. The numbers reported in this chart reflect the numbers of licensed or certified providers within the White Center and East Yakima catchment areas, as reported to DEL by the site coordinators in the two communities.*

*** Because of the number of eligible providers in the two Thrive by Five communities given the smaller catchment area, Thrive by Five chose to randomly select a different number of centers and family homes for the field test than the other three communities.*

There were certain opportunities to gather further detail on applicants in the two Thrive by Five demonstration communities that did not exist in the other three counties. This is because the Thrive by Five communities are a smaller geographic area and providers were given the option by the two sites to come into their offices to complete the application, which gave the communities the opportunity to gather information on languages spoken. Therefore, White Center was able to report that eleven Somali speaking family home providers, three Spanish speaking family home providers, and two Vietnamese speaking family home providers applied and East Yakima was able to report that 33 Spanish speaking family home providers applied.

Evaluation of the field test year

One of the key “lessons learned” from other states that have implemented a QRIS is the need to gather data every step of the way. Many states did not collect baseline data prior to implementing a QRIS, making it difficult or impossible to accurately measure outcomes over time.

A 2008 Rand Corporation evaluation of Colorado’s QRIS emphasizes the importance of baseline data in evaluating the effectiveness of a QRIS over time. The Rand evaluation executive summary is available on DEL’s Web site at www.del.wa.gov/partnerships/qris/research.aspx

DEL believes it is critical to gather both qualitative and quantitative data during every step of a design and field test, so that:

- The Governor and Legislature have needed information to make policy and budget decisions.
- The impact of QRIS on families, providers and early learning environments can be measured over time.

During the field test, DEL aimed to learn whether the Seeds to Success model works—namely, whether the coaching and financial incentives are sufficient to attract providers, whether the quality levels in the Seeds model relate to other standardized measures of quality, and how much parents are involved during field testing. DEL had contracted with the University of Washington Human Services Policy Center and the University of Washington Center on Infant Mental Health and Development. The plan during the field test year was to gather baseline data about:

- Quality in programs
- Teacher training and education

- Parent, teacher, and director involvement in developing facility improvement plans (FIP)
- Current costs and characteristics of care quality
- Caregiver interactions in the learning environment
- Job satisfaction

These data would offer a much-needed baseline should Washington choose to evaluate the effectiveness of QRIS over time.

Communication during the field test year

From the beginning, DEL recognized that communication—both with communities and with the public—would be critical to successful field testing. DEL established a communications work group that consisted of DEL’s communications manager and a representative of each community to talk about what kinds of communications materials and support would be needed during field testing.

As a result of that work group, DEL created key messages for all communities to use to ensure we are speaking about Seeds to Success with “one voice.” DEL also created press releases for the communities to disseminate announcing the upcoming field test year, and other materials. DEL provides ongoing media relations support to the communities, and works collaboratively with Thrive by Five on communications efforts.

Learning during the field test year

The field test was viewed a time to learn together with communities about what works and what would need to be changed in the Seeds to Success model. This approach—with the accompanying “unknowns” about the future and frequent changes and course corrections—can be uncomfortable. DEL gratefully acknowledges the design and field test communities for agreeing to be part of this important project, which required a “leap of faith” at times. A very illustrative example of the learning that would occur during a field test year is the widely varying questions asked by participants during the town hall meetings held in October and November 2008.

The questions and details relating to Seeds to Success are immense and seemingly never-ending. This shows the need for a field test, during which time DEL and communities could make decisions, gather information and learn what works and what would need to be changed before decisions are made about next steps related to Seeds to Success. The five communities would be required to submit monthly reports to DEL during field testing, which would serve as a “parking lot” for issues that have come up as field testing of the standards got under way.

Next steps for Seeds to Success

Because of the budget situation in our state and around the nation, DEL had to find nearly \$4 million in state funding to cut in our current fiscal year budget. This is *in addition to* other tough budget cuts we and other state agencies have made in recent months.

In deciding how to find these savings, DEL focused on what we could do that would have the smallest impact on direct services to children and families. We looked at all of our state funding, and evaluated what had not been spent and what would least impact our most vulnerable children.

In the end, DEL suspended our work on QRIS and other projects where DEL has not fully contracted out all the funds allocated. DEL also reduced state office administration.

None of these were easy decisions, and DEL acknowledges the many Washingtonians who have dedicated time and energy to the QRIS design and field test over the past two years.

At a December 3, 2008, joint work session on QRIS convened by the House of Representatives and Senate early learning committees, much discussion occurred about progress to date in Washington, and opportunities for continuing the QRIS work in our state despite the current economic situation. In addition, experts from other states joined to discuss the national QRIS picture.

Any information system designed in the future for DEL could include additional data about child care facilities that is currently housed in paper files throughout DEL's 18 field offices. Some of this information goes above and beyond minimum health and safety rules, and could in fact be used to inform a "bigger picture" of quality in child care. Components of the monitoring checklist include programmatic elements; for example, whether materials and activities are culturally relevant and developmentally appropriate; how staff interact, discipline and guide children; and whether communication with parents occurs. DEL's child care center and family home provider monitoring checklists are available on DEL's Web site at www.del.wa.gov/publications/licensing/#forms

In a time when resources are scarce, it may be appropriate to have further discussion around using information captured during licensing visits to help inform quality. It is worth noting that whenever licensing staff focus on paperwork or data collection, this would impact the time they have for monitoring, inspecting complaints, and providing support to licensed providers.

We have made tremendous progress on QRIS, thanks to the work of the pilot communities, and we are very well-positioned to move forward with this work in better budget times. We have:

- A research-based model built with the input of thousands of Washingtonians.
- Information about how many child care providers were interested in applying, whether they offer center or home-based care, and how many children they serve who receive subsidies.
- Information about community capacity and needs.
- Information about communications needs during a QRIS field test.

Kindergarten assessment process



KINDERGARTEN ASSESSMENT PROCESS PLANNING REPORT

Prepared by SRI International:

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Submitted to DEL Director Jone Bosworth

INTRODUCTION

This report summarizes information gathered to help guide next steps in the planning of a statewide kindergarten assessment process in Washington State. The Washington State Legislature asked the State Department of Early Learning (DEL) and the Office of Superintendent of Public Instruction (OSPI), in collaboration with Thrive by Five Washington (Thrive), to research and make recommendations to the Legislature on a statewide kindergarten assessment process. DEL contracted with SRI International (SRI), a nonprofit research and consulting firm, to assist with the planning process. All three organizations collaboratively directed SRI's work by participating in weekly conference calls to regularly review progress made and documents produced, including this report. The information presented in this report was collected within a two-month period (mid-September to mid-November 2008) so that the report could be shared with the state Legislature on December 15, 2008.

The findings and recommendations about whether and how a statewide kindergarten assessment process could be implemented in Washington State included in this report are based on consultation with a variety of stakeholder groups. Rather, most stakeholder input came from an online survey that was conducted in the last two weeks of October 2008. This input was augmented by two focus groups held by phone, one with Washington-based early learning and assessment experts and the other with cultural competency experts. In addition, input was gathered by listening to Washington Indian Tribes discuss their perspectives on a statewide kindergarten assessment process at the Washington State Tribal Leaders Congress on Education meeting held on October 15, 2008. Finally, DEL staff gathered input by phone from 20 stakeholders.

SRI also reviewed the literature on best practices for the assessment of young children, including position papers, policy briefs, journal articles, and book chapters, and synthesized information and reports available on the Web about kindergarten assessment processes being used by other states and countries. The full bibliography used to inform this report is found in a separate document posted on the DEL Web site at www.del.wa.gov/development/kindergarten/readiness_plan.aspx. Finally, to gather information on current kindergarten assessment processes being used by schools in Washington State, SRI worked with OSPI to develop and implement an online survey that asked schools statewide about their current kindergarten assessment processes, and conducted telephone interviews with representatives from six Washington State school districts about their local assessment processes.

The goal of this report is to meet the requirement put forth in the 2008 supplemental state operating budget, Section 616 (14):

§150,000 of the general fund--state appropriation for fiscal year 2009 is provided solely for the department of early learning to work with the office of the superintendent of public instruction, and collaborate with thrive by five Washington, to study and make recommendations regarding the implementation of a statewide kindergarten entry assessment. The department and the office of the superintendent of public instruction shall jointly submit a report with recommendations for implementing the kindergarten entry assessment to the governor and the appropriate committees of the legislature by December 15, 2008. In the study and development of the recommendations, the department shall:

- (a) Consult with early learning experts, including research and educator associations, early learning and kindergarten teachers, and Washington Indian tribes;*
- (b) Identify a preferred kindergarten entry assessment based on research and examples of other assessments, and which is sensitive to cultural and socioeconomic differences influencing the development of young children;*
- (c) Recommend a plan for the use of the assessment in a pilot phase and a voluntary use phase, and recommend a time certain when school districts must offer the assessment;*
- (d) Recommend how to report the results of the assessment to parents, the office of the superintendent of public instruction, and the department of early learning in a common format, and for a methodology for conducting the assessments;*
- (e) Analyze how the assessment could be used to improve instruction for individual students entering kindergarten and identify whether and how the assessment results could be used to improve the early learning and K-12 systems, including the transition between the systems;*
- (f) Identify the costs of the assessment, including the time required to administer the assessment; and*
- (g) Recommend how to ensure that the assessment shall not be used to screen or otherwise preclude children from entering kindergarten if they are otherwise eligible.*

Based on our research and input from stakeholders, the appropriate approach to this work is talking about a “kindergarten assessment process,” which is how it is referred to throughout this report. This report includes recommendations and considerations about the following:

- How a kindergarten assessment process can be used to improve instruction, the early learning and K-12 systems, or for other purposes.
- What methodology or approaches could be used for conducting a kindergarten assessment process, including those sensitive to cultural and socioeconomic differences influencing the development of young children.
- How to ensure that a kindergarten assessment process is not used to screen or preclude children from entering kindergarten if they are otherwise eligible.
- How the information could be shared with parents, OSPI, DEL, and others.
- The costs, including time and funding required for a kindergarten assessment process.
- A plan for developing and implementing a pilot of a kindergarten assessment process in Washington State.

This report begins with a summary of the information gathered on best practices for the assessment of young children, examples of other state and national kindergarten assessment processes, kindergarten assessment processes used currently in Washington State schools, and the priorities of various stakeholders for a statewide kindergarten assessment process.

Recommendations and considerations for next steps in developing a kindergarten assessment process, and a suggested implementation plan, are provided in the later part of the report. First, however, we provide a brief definition of kindergarten readiness and an explanation of what a kindergarten assessment process is.

Definition of kindergarten readiness. DEL, OSPI, and Thrive believe that kindergarten readiness is much more than whether a child is ready for school. They define kindergarten readiness as an equation including four concepts: Kindergarten readiness = Ready children + Ready schools + Ready parents and families + Ready communities. This equation stipulates that many people and contexts play roles in ensuring children enter kindergarten ready to learn.

Definition of a kindergarten assessment process. A kindergarten assessment process is an organized way to learn what children know and are able to do, including their disposition toward learning, when they enter kindergarten and possibly at other points in time (e.g., before leaving preschool or throughout the kindergarten school year). It is not a single test or an assessment tool. Rather, it is a *process* that includes the activities that happen *before* any type of assessment takes place, such as training and professional development of those giving the assessment; the activities that happen *during* an assessment period, such as the administration of the tools and methods used to collect information on children’s skills and knowledge; and the activities that happen *after* the assessment period, such as how the results of an assessment are analyzed, shared, and used to support children and inform policies. Designing a kindergarten assessment process presents opportunities for Washington’s children, educators, and policy-makers. However, designing a kindergarten assessment process is complex because there are many interrelated decisions to be made about its purpose(s), focus, methods, and implementation. For example, a kindergarten assessment may have a single or multiple purposes and audiences; it may focus on one or several areas of children’s skills and development; it may include a variety of methods to gather information about children’s abilities; it may use information collected from a variety of sources, including kindergarten teachers, caregivers, parents, and assessors; and results may be shared with a variety of stakeholders in a variety of formats.

Defining what a kindergarten assessment process will look like for Washington State is complex and takes time because it requires defining local priorities and then making decisions based on them, building on knowledge about best and current practices, and designing a process that is feasible given the available resources. Further, defining a kindergarten assessment process for Washington State will require broad stakeholder involvement to ensure that the decisions being made about the process will benefit children with diverse backgrounds, experiences, and competencies. With thoughtful consideration and planning, a kindergarten assessment process could provide reliable information about the skills, development, and competencies of the nearly 72,000 children entering kindergarten in Washington State each year. This information could be used in a variety of ways to support families, parents, schools, and communities in helping children succeed in kindergarten and beyond.

BEST PRACTICES FOR THE ASSESSMENT OF YOUNG CHILDREN

Because assessing young children can be challenging and complex, many organizations dedicated to supporting young children have identified best practices to ensure that assessments of young children are conducted, interpreted, and used in ways that help children and do not harm them in any way. Best practices articulate the characteristics of an assessment process that are most likely to lead to accurate and useful information about children's skills, abilities and competencies that can then be used for a variety of beneficial purposes.

To provide a context for the recommendations and considerations presented at the end of this report, we reviewed and summarized the substantial literature related to assessment of young children, including position statements from organizations focused on assessment practices.⁵ These organizations include the National Research Council, the American Educational Research Association and the American Psychological Association, the National Center for Measurement in Education, the National Education Goals Panel, the National Association for the Education of Young Children, the National Association of Early Childhood Specialists in State Departments of Education, the National Association of School Psychologists, the Division for Early Childhood, and the Pew National Early Childhood Accountability Task Force. Recommendations for best practices and guiding principles when assessing young children are summarized and outlined below. In general, an assessment process should do the following:

- **Benefit children and do no harm.**

An assessment process must be carried out in ways that bring benefits to children, and they must be done in ways that support children's self-confidence and learning. There is universal agreement that using assessments to understand and improve children's learning is a beneficial use; however, there is also universal agreement that using assessment data to keep children from entering kindergarten or to determine their placement in kindergarten is harmful.⁶

¹⁰ Assessment data should never be used to deny children opportunities or services. In addition, the implementation of assessment procedures should not harm a child's self-esteem by negatively labeling a child or focusing exclusively on deficits or failures. Rather, the assessment process should identify a child's positive skills and unique strengths that then can serve as the basis to build new and better skills.

- **Be appropriate for the population being assessed, including being culturally and linguistically responsive.**

The literature on best practices for assessment of young children universally asserts that it is unfair to subject children to an assessment process that does not accurately tap into their knowledge, skills, or potential. Assessment processes should be designed and validated for use with the ages, cultures, languages, socioeconomic levels, abilities and disabilities, and other characteristics of the children who are being assessed. Using assessment tools or processes that are linguistically or culturally inappropriate may underestimate children's true abilities and competencies, thus leading to inaccurate conclusions.¹¹⁻¹³ Also, the individuals conducting

The following are some of the decisions that will need to be made:

- *When will the assessment process collect information about children?* Assessment information could be collected before children enter kindergarten, at a kindergarten orientation event, early in the kindergarten year, during the middle or end of the kindergarten year, or throughout the kindergarten year.
- *Should the assessment process include gathering information collected by ECE and pre-school programs?* Many pre-kindergarten programs collect information on children's skills, development, and competencies. Including information about children collected by ECE and preschool staff in the assessment process can help kindergarten teachers tailor instruction to best meet children's needs and competencies. Additionally, formalizing a process to transfer information about children from their pre-kindergarten to kindergarten classrooms could strengthen communication across early learning systems and ease the transition between ECE programs and K-12 schools for children and families.
- *What level of standardization across schools is needed to meet the identified purposes?* In particular, should the process involve the use of common assessment tools and methods across all schools or should schools make all or some decisions locally? Variation in current methods being used across the state makes it difficult to summarize results across schools or districts. On the other hand, local school districts have invested time, training, and other resources in their current assessment processes.
- *Should the assessment process include all children or a sample of children or schools?* Whether or not sampling can be used depends on the purpose(s). If the purpose is to inform instruction for individual children, then all children need to be assessed. If the only purpose is to understand how cohorts of kindergarten children are doing from year to year or to inform planning about early learning investments, then a sampling approach may be more appropriate. It will also be important to decide whether the process will pertain only to children in public schools or also to those attending private schools.
- *What kinds of assessment tools and approaches should be used to collect data?* There are pros and cons to different types of assessment approaches, such as direct assessments (e.g., standardized reading, vocabulary, and early math assessments) versus naturalistic assessments (e.g., observational tools, portfolio samples of children's work, and parent or teacher checklists). Direct assessments are seen as more objective, valid, and reliable by many early childhood researchers and school personnel, and they have norms for general populations of children.¹¹ On the other hand, they have been criticized as inappropriate for many young children, especially for children with diverse cultural and language backgrounds and those with disabilities.^{11, 39, 40} Because many young children often do not perform well for unfamiliar adults or on demand, collecting assessment information by using naturalistic approaches, such as observation and interview methods, conducted in familiar settings and with people familiar to children is highly recommended. Use of naturalistic methods such as observation, portfolios of student work, and checklist assessments may be especially useful approaches for obtaining valid information about children from diverse cultural and language backgrounds and those with disabilities.^{11, 35, 41-43}

- *Should the assessment process use existing tools or develop new assessment tools?* This decision will depend on whether existing assessment tools can be found that meet the information needs for the purpose(s) identified and whether the assessment process will need to be closely aligned with the Washington State Early Learning and Development Benchmarks. Additional time and funds may be required to align the assessment process with existing standards.
- *Who should be involved in collecting information about children’s skills and development?* Assessment information can be collected from teachers, trained assessors, parents, ECE providers, and other persons who know the child well (e.g., other relatives, child care providers, specialist school staff). Though not a common practice currently, Washington State stakeholders strongly support collecting information from parents as part of the assessment process. Gathering assessment information from multiple sources is a best practice, but it can increase costs and complicate interpretation and reporting of data.
- *How should the individuals who collect information on children’s skills and development be trained to ensure reliability and proper use of the information?* The type and amount of training required will depend on the purpose(s) of the assessment process identified and complexity of the tools selected. Although more training may be necessary to ensure reliability if using an observational, portfolio, or checklist assessment tool, this training also will build the capacity of teachers and/or parents to support children’s learning and development. Training can be offered in various ways, including training packets reviewed collectively through telephone conference calls, online training modules, or training workshops for all kindergarten teachers or for school lead teachers.

Include explicit features to ensure that a kindergarten assessment process is not used to screen or preclude children from entering kindergarten if they are otherwise age-eligible.

Best practices in assessment and stakeholder input strongly endorse having an explicit and consistent policy statement that specifies that the adopted kindergarten assessment process will not, and must not, be used to preclude children from entering kindergarten when they are age-eligible.⁶⁻¹⁰ Such a statement should be contained in all documents about the kindergarten assessment process. Consideration should be given to conducting the assessment process after children enter kindergarten so it cannot be used to preclude children from entering. Training of teachers, administrators, and others on proper use of assessment can also serve to prevent this kind of misuse of an assessment process.

Develop plans for how the information from the kindergarten assessment process will be shared with parents, OSPI, school personnel, DEL, the public, and other stakeholder groups.

Data from a kindergarten assessment process will be of great interest to many different groups in Washington State. The planning process must lead to a detailed plan for how the data will be analyzed and reported back to the interested groups (e.g., individual teachers, schools and/or district administrators, parents, and taxpayers). Whether and how data are reported to various groups will vary according to the purpose(s) identified and approaches selected for the assessment process.

assessments should be knowledgeable about the children's cultures and be able to assess children in their primary language. Inclusion of parents in the assessment process can provide more accurate information about children, especially if teachers and assessors do not reflect the child's culture or linguistic background.

- **Include accommodations for children with disabilities.**

Assessment processes involving young children with disabilities should include a variety of adaptations that allow children to demonstrate their skills and competencies in alternative ways (e.g., a child who cannot hear or speak can sign) or with accommodations (e.g., a child with a physical limitation can demonstrate verbal understanding using eye gaze; a child may need more time to complete a task). Best practices position statements highlight that this issue is particularly challenging because few assessment tools include such accommodations. They also recommend the inclusion of parents in the assessment process to gather more accurate information about the full extent of children's skills and knowledge.

- **Provide useful, valid, and reliable information.**

An assessment process should include a variety of methods that are technically sound and validated for the purpose(s) for which the assessment process is intended, including the provision of norms for children from diverse backgrounds and children with disabilities or other special needs. Useful, valid, and reliable information means that the assessment process provides the types of information needed, correctly gives information about children's skills, and is able to produce the same results when used by different assessors. Best practices position statements note that although numerous early childhood assessment tools are available, many of them are limited in terms of validity and reliability, particularly for children from diverse cultures, English learners, and those with disabilities.

- **Collect information on multiple areas of development.**

Research suggests that a process to assess what children know and can do when they enter kindergarten should be multifaceted and include measures of a range of skills, across multiple areas of development. The widely cited National Education Goals Panel (NEGP) identified five areas of children's development and learning that are important to school success: physical well-being and motor development; social and emotional development; language development; approaches to learning; and cognition and general knowledge.¹⁴ Most best practice guidelines and early learning standards recommend use of a comprehensive assessment approach that incorporates all five NEGP areas of development. More narrowly designed assessment approaches may underestimate some important competencies. Furthermore, understanding children's skills and behaviors across all domains will give better information for planning future instruction.

Research also suggests that the areas of learning development are closely related to each other.^{11, 15, 16} For example, how well a child has learned to communicate affects how well the child can demonstrate thinking skills and knowledge about math or colors. Similarly, a child

who is shy with adults or who has trouble paying attention may not be able to show what he or she really knows during the assessment process.

- **Include multiple sources of information, including family participation and input.**

Gathering information from multiple sources, such as kindergarten teachers, trained assessors, parents, and early care and education (ECE) providers, is recommended for best understanding young children's skills and competencies.^{10, 11} Young children are variable in their tendencies to be verbal, follow directions, focus their attention and persist on a task, and be sociable with an unfamiliar adult. This variability can influence assessment results, particularly on standardized direct assessments.

There is universal agreement across position statements and the research literature about best assessment practices that parents are essential participants in a valid and useful assessment process, both as informants about their child's skills and abilities and as recipients of assessment information. Parents have unique information about children from their daily interactions and the many everyday contexts in which they and their children participate.

The best practices position statements and the research literature also recommend collecting information from teachers who worked with children prior to their entry to kindergarten.¹⁷⁻¹⁹ ECE providers have unique perspectives on children's early development and learning that could help kindergarten teachers to better understand and serve incoming students. Further, many preschool programs have assessment information they have already collected on the children participating in their programs that they can share with elementary schools. Finally, gathering information about children's pre-kindergarten experiences from ECE providers in the assessment process promotes continuity between preschool and elementary school settings.

- **Include information collected through naturalistic methods in familiar settings.**

Because many young children often do not perform well for unfamiliar adults or on demand, collecting assessment information by using naturalistic methods in familiar settings, with people familiar to children, and over time is highly recommended.^{11, 20, 21} Naturalistic methods refer to assessment techniques used in the natural setting of children's classrooms and include gathering examples of children's work and observing children's performance and behavior as they go about their daily work.^{22, 23} Work examples and observations are then scored for level of proficiency, using rating scales or rubrics on which the observing adult has been trained. Naturalistic methods may be especially useful approaches for obtaining valid information about children from diverse cultural and language backgrounds and those with disabilities.

- **Be repeated over time.**

Because of the variations in children's performance from day to day and the fact that developmental growth patterns are typically uneven, relying on a single performance at only one point

in time is not an accurate or fair way to draw conclusions about a child’s abilities.^{10, 11, 24, 25} Best practice guidelines uniformly state that assessments are most accurate and useful when done repeatedly over time. Use of repeated assessments emphasizes growth and gains in skills and learning over time; research shows that this approach more accurately indicates children’s competencies. A focus on growth over time also allows teachers and parents to celebrate strengths and achievements of children, while also using assessment information to plan how to support children’s continuing growth and learning.

- **Be supported by professional development.**

The quality of assessment data relies heavily on the accuracy of implementation; thus, training is critically important. If assessments are not done well, the data collected may not provide the information sought and/or may inaccurately represent children’s performance. The individuals collecting the assessment information should be well trained in child development, assessment principles, and the tools being used for conducting assessments. They also should be knowledgeable about the children’s cultures and capable of assessing children in their primary language.

- **Be feasible and realistic, given the implementation context.**

Ultimately, the kindergarten assessment process selected for implementation must be feasible. Issues that influence the feasibility of an assessment process include cost, capacity, and additional burden on districts, schools, teachers, children, and families.

Although designing a statewide kindergarten assessment process that adopts all the best practices outlined in this section may be challenging, it is important to understand and keep best practices in mind in order to make effective and informed decisions. The Washington State Legislature and other stakeholders will need to prioritize a number of competing purposes and constraints during the development and implementation of a statewide kindergarten assessment process, including prioritizing the best practices most important to adopt.

“What is so awesome about this opportunity [to discuss a statewide kindergarten assessment process] is that we are given a chance to teach people that there is a way to do this that honors each child.”

—A Tribal Congress member

EXAMPLES OF STATE AND OTHER LARGE-SCALE KINDERGARTEN ASSESSMENT PROCESSES

To learn about and build on the experiences of others with regard to large-scale kindergarten assessment processes, SRI reviewed published literature related to practices used to assess children in kindergarten. Information was gathered from the Web sites of state departments of education and organizations known for their work in early care and education, early childhood assessment, and/or school readiness, and from early childhood experts at SRI, DEL, OSPI, and Thrive.

Our review found that at least 19 states in the nation have implemented some form of kindergarten assessment process since 2006, and the characteristics of these processes are presented below. In addition, we reviewed assessment processes from two countries outside the United States (Canada and New Zealand). The following sections describe the nature of the assessment processes reviewed, including key purposes, areas of children's skills and development measured, methods used to collect information, and other assessment implementation characteristics. However, the analysis presented here provides a broad perspective of large-scale kindergarten assessment processes rather than a thorough content analysis because of the lack of specificity provided in available reports. For example, information on why particular assessment tools were selected and on the specific procedures being used, including administration, data analysis and reporting, and associated costs, often was incomplete or missing. Below we present the general trends that we identified across the information available. We acknowledge that we may have miscategorized aspects of some states' assessment processes because of the lack of information. Also, it is important to note that many of the large-scale assessment processes reviewed do not adopt all best practices described in the preceding section. Rather, it seems that large-scale assessment processes reflect the best practices most relevant to states' local purposes and circumstances.

Purposes. Most of the states (15 of 19) indicate that improving individual instruction is one of their explicit purposes for implementing their kindergarten assessment process. Another common purpose, identified by 11 of 19 of the states, is to guide planning at the school, district, or state level. More than a fifth of the states (4 of 19) indicate that sharing information with parents about children's strengths and areas of growth is one purpose for their statewide kindergarten assessment process. Very few states (2 of 19) report using statewide kindergarten assessment processes to screen for potential delays or special needs (e.g., Idaho) and only 1 of 19 (Hawaii) reports using them to support improvements in transitions between ECE programs and K-12 schools.

CONCLUSION

The Washington State Legislature's request that DEL, OSPI, and Thrive work together to research and make recommendations to the Legislature about developing a kindergarten assessment process presents both challenges and opportunities. Designing a kindergarten assessment process is complex because there are many interrelated decisions to be made about its purpose(s), focus, methods, and implementation. However, with thoughtful consideration and planning, a kindergarten assessment process could provide reliable information about the skills, development, and competencies of the nearly 72,000 children entering kindergarten in Washington State each year. This information could be used in a variety of ways to support families, parents, schools, and communities in helping children succeed in kindergarten and beyond.

This report establishes a foundation for further planning for a statewide kindergarten assessment process in Washington State. It provides a summary of the literature on best practices in kindergarten assessment, a snapshot of current kindergarten assessment practices in schools across Washington, examples of kindergarten assessment processes in other states and countries, and priorities from a variety of stakeholders in Washington for a statewide kindergarten assessment process.

Additional planning and decision-making still need to be done. This planning needs to involve the many stakeholders who will be affected by a kindergarten assessment process as well as the information on best and current practices presented in this report. During this planning, it will be important to clarify goals and determine how stakeholder concerns could be addressed, so that a shared understanding of a statewide kindergarten assessment process can be established.

Planning for a kindergarten assessment process also needs to take into account that the vast majority of schools in Washington State already have some type of kindergarten assessment process. However, because these processes tend to be narrow in scope and rely heavily on locally developed tools, they do not lend themselves to use for statewide summaries about what children know and are able to do when they enter kindergarten. A statewide kindergarten assessment process could complement and strengthen what local schools are already doing. For example, a statewide process could support the use of local kindergarten assessment processes that are more comprehensive, developmentally appropriate, culturally and linguistically responsive, inclusive of children with special needs, tied to children's daily activities, supported by professional development, inclusive of families, and connected to specific, beneficial purposes.

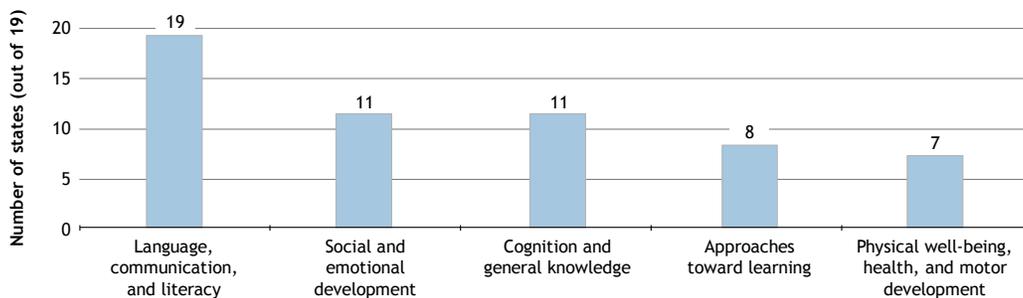
Designing a statewide kindergarten assessment process that adheres to the best practices for assessment of young children and aligns with the priorities of Washington stakeholders is complex and difficult, but such a process could have far-reaching benefits for children in the state.

END NOTES

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Areas of skills and development measured. All 19 states report including some measure of language and literacy in their kindergarten assessment processes (Exhibit 1). More than half (11 of 19) also include measures of social and emotional development and cognition and general knowledge. Fewer states include measures of physical well-being, health, and/or motor development (7 of 19) and approaches toward learning (8 of 19).

Exhibit 1. Areas of Development Assessed by Other States



More than a quarter of states (5 of 19) include measures of all five areas of development (e.g., Oregon, Vermont) and an additional 2 of 19 include measures of four areas (e.g., Maryland); thus, more than a third of the states are conducting very comprehensive kindergarten assessment processes. Our review of international practices also included an innovative holistic approach called “Kei Tua o te Pae” used in New Zealand with Maori children. This approach recognizes that the dimensions of children’s learning and development are interrelated and interconnected and that an assessment must include information about the whole child. Multiple areas of children’s skills and development (e.g., cognitive, physical, social, emotional, and spiritual domains), as well as their dispositions for learning (e.g., courage, curiosity, trust, playfulness, perseverance, confidence, responsibility, persistence, interest), are measured. Another international assessment process, developed in Canada, the Early Development Instrument (EDI), is also a comprehensive process that asks teachers to answer questions about how children in their classes are doing in five areas of childhood development.

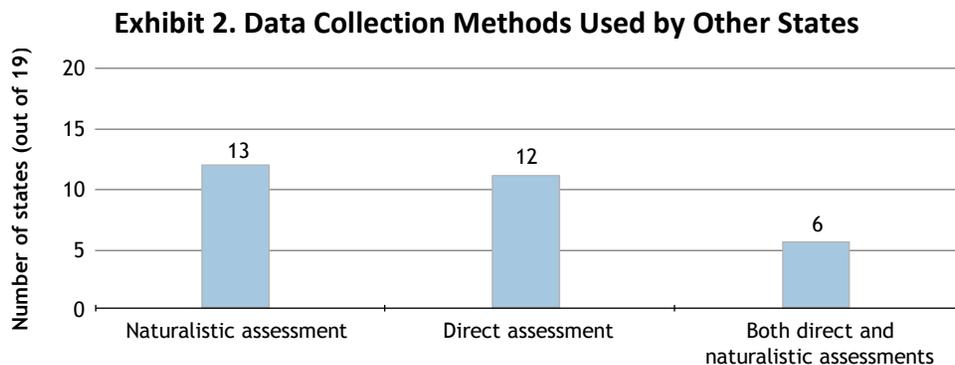
Standardization across districts/schools. Most (15 of 19) states require districts or schools to use specified assessment tools and processes; the other 4 states allow districts and schools to select assessment strategies within given parameters. For example, North Dakota, Iowa, and Texas allow schools to select assessment tools from a specific menu of options.

Methods for collecting information on children. Many of the states (13 of 19) use some form of teacher-completed checklists, questionnaires, or rating scales that are based on naturalistic observations and/or portfolios of children’s work and behavior (e.g., Maryland,

Indiana) (Exhibit 2). Teacher checklists or rating scales often use 3- to 5-point scales indicating levels of children’s proficiency in a variety of areas. Several of the checklists are based on performance indicators from the Work Sampling System (e.g., Maryland, Minnesota, Vermont); some others are tied to performance indicators based on state learning benchmarks (e.g., Alaska, Georgia). The Early Development Instrument (EDI), used extensively in Canada, includes a comprehensive teacher checklist.

Almost as many states (12 of 19) use at least one direct assessment of children’s development and skills, and these direct assessments are usually published and commercially available (e.g., Idaho, Iowa). Across reviewed states, direct assessments tend to focus on literacy and communication skills, such as the Dynamic Indicators of Basic Early Literacy Skills (DIBELS), Kindergarten Readiness Assessment-Literacy (KRA-L), and Phonological Awareness Literacy Screening-Kindergarten (PALS-K). In fact, some states (8 of 19) use only direct literacy assessments (e.g., Alabama, Indiana, Ohio) and these are used primarily to support early literacy initiatives.

Some states (6 of 19) use a combination of naturalistic and direct assessment approaches. For example, Florida administers DIBELS in combination with a teacher checklist that measures additional aspects of what children know and are able to do.



Parents as a source of information. Only a couple of states (Alaska and Rhode Island) specifically mention collecting information from parents as part of their kindergarten assessment process. In these cases, information is collected from the parents by either the kindergarten teacher or other school staff through an interview. New Zealand’s “Kei Tua o te Pae” also involves multiple perspectives in the assessment process, including those of the children themselves, their parents, and their educators. Parents provide information about their children’s interests, strengths, and aspirations, as well as about the family’s cultural background. Parent information is gathered through a variety of methods, including enrollment forms, conversations with teachers, and the sharing of written stories accompanied by photographs.^{26, 27}

Timing of assessment process. The timing of assessments varies widely among states, often based on the primary purpose for conducting the assessment process. Of the 17 states that specify the timing of the assessment process, 10 collect information on children only at entry, often 4 to 8 weeks after school begins (e.g., Alaska, Florida, Hawaii). Other states (2 of 17) wait until the middle of the school year before assessing children (Oregon, Rhode Island). Still other states (5 of 17) collect information at the beginning of the year and again in the spring (e.g., Arkansas, Virginia) or throughout the year (Georgia), as does New Zealand. The timing and frequency of administering assessments are directly related to the purpose for conducting the assessment process. For example, if states are interested primarily in collecting information to guide early learning investments, assessments are generally conducted at the beginning of the school year. If states are more interested in tailoring instruction for individual students and monitoring their progress throughout the year, assessments may be administered more often.

Sampling. Only 2 of 19 states mention using a sampling approach. For example, Minnesota selects only 10% of its schools each year to participate in its kindergarten assessment process. Most states, however, assess all children in all kindergarten classrooms each year.

Measurement of schools' readiness for children. The review found that only one state (Rhode Island) measures aspects of schools' readiness for children as part of its assessment process. Rhode Island recognizes that schools that are ready to meet the needs of entering kindergarten children have smaller class sizes, kindergarten teachers trained in early childhood education, and a curriculum designed to meet all children's developmental needs.

"The assessment process should be strengths based so that parents know where children are and so that schools can meet the needs of children, not so children can meet the needs of schools."

—An ECE provider

"Effective formative assessment practices include meaningful tasks, active involvement by learners, a culture of success, the opportunity for all learners to express their ideas, and elements of self-assessment."

—An early learning expert

LOCAL KINDERGARTEN READINESS PROCESSES USED IN WASHINGTON

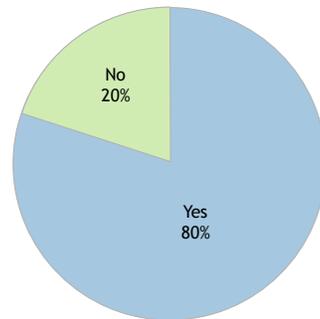
This section provides a brief summary of information collected through an online survey of Washington State districts and schools to learn about kindergarten assessment processes currently in use in the state. An invitation to complete the survey was sent to principals of all elementary schools with kindergarten classrooms in the state ($N = 1,307$) and to all District Assessment Coordinators serving districts including schools with kindergarten classrooms ($N = 301$). The survey was available online to complete between September 25 and October 8, 2008. Surveys completed by representatives from districts ($n = 25$) and schools ($n = 248$) provide information about the assessment practices for 593 schools with kindergarten classrooms in Washington State. This represents roughly half (45%) of the 1,307 schools with kindergarten classrooms in the state. Information provided in this section is based on the 593 schools with complete survey data, as well as on qualitative information about local kindergarten assessment processes gathered through telephone interviews with representatives from six Washington State school districts. A detailed description of the survey methodology and full results can be found in Appendix B-1.

Many schools in Washington State are already gathering information about what children know and are able to do and about their competencies close to kindergarten entry. Some of the processes used by schools described in this section reflect best practices for the assessment of young children (e.g., measuring more than one area of children's skills and development and sharing assessment information with parents), while others do not (e.g., excluding children with disabilities or other special needs from the processes, using tools available only in English, and not collecting assessment information from parents). In the absence of state-wide requirements and funding for kindergarten assessment processes, districts and schools appear to be implementing processes that best meet their immediate needs, given their local priorities and resources. Thus, with limited resources and guidance, it is difficult for schools to follow some best practices.

Prevalence of kindergarten assessment processes in the state. Most of the schools (80%) with survey data already conduct some form of kindergarten assessment process (Exhibit 3). All interviewed district representatives report assessing entering kindergarten students. The data presented in the remainder of this section represent the 472 schools that indicate that they administer a kindergarten assessment process.

Purposes for assessing entering kindergarten students. Schools that administer some form of schoolwide assessment of entering kindergarten students report doing so for multiple purposes. The most commonly cited purposes include informing instruction for individual students (96%), informing instruction at the classroom level (88%), and informing parents of children's strengths and areas for growth (81%).

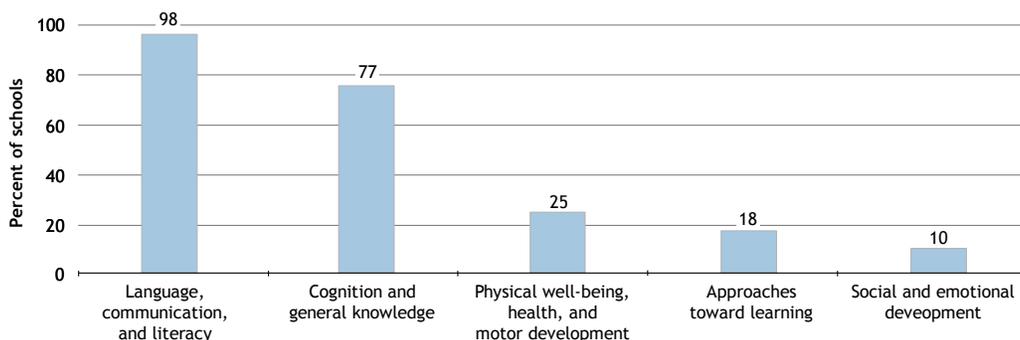
Exhibit 3. Elementary Schools in Washington State That Already Implement a Kindergarten Assessment Process (N = 593)



Fewer schools with a kindergarten assessment process cite screening children for potential developmental delays (77%), informing planning for ongoing investment in early learning (60%), and supporting transition and alignment between ECE programs and K-12 schools (22%). Interviewed representatives of six districts report conducting assessments to inform instruction at the student and classroom levels, to inform parents of children’s strengths and areas for growth, and to support transition and alignment between ECE programs and K-12 schools. Most district representatives also report using the assessment process to screen children for potential developmental delays.

Areas of children’s skills and development assessed. Few of the schools with a kindergarten assessment process conduct comprehensive assessment processes that gather information about multiple areas of children’s skills and development. Rather, most of these schools’ assessment processes measure only one (43%) or two (22%) areas of children’s skills and development. Nearly all of the schools (98%) measure children’s language, communication, and literacy skills (Exhibit 4). More than three-fourths (77%) assess children’s cognition and general knowledge. Schools that completed the survey are much less likely to measure approaches toward learning (18%) and social and emotional development (10%). While all the district representatives interviewed report measuring language, communication, and literacy, none report using an assessment process that measures more than two areas of children’s skills and development.

Exhibit 4. Areas of Children’s Skills and Development Assessed by Schools (N = 472)



Assessment tools used. The most commonly cited assessment methods used in the schools with a kindergarten assessment process are developed locally by districts or schools (47%), with the exception of the use of the Dynamic Indicators of Basic Early Literacy Skills (DIBELS) to measure children’s literacy skills (55%). More than half of schools using DIBELS do so in combination with at least one other assessment tool, often developed locally. Most district representatives interviewed also report using DIBELS.

Additional characteristics of schoolwide assessment processes. Schools with a kindergarten assessment process most commonly report beginning their assessment process at entry or within the first month of school (75%). Interviewed district representatives also report assessing students within the first month of school.

The implementation of most schoolwide assessment processes involves a combination of staff. The majority of schools with a kindergarten assessment process report that kindergarten teachers (85%) and/or other school staff (63%) administer the assessments. Most interviewed district representatives report using a team of trained professionals to conduct the assessments, as do 41% of the schools. Few Washington schools (4%) with a kindergarten assessment process report involving parents in their current assessment processes. Offering assessments in languages other than English and having them conducted by a person who speaks the child’s primary language appear to be challenging for most schools. Nearly 70% of the schools with a kindergarten assessment process report that at least one of the tools used in their assessment process is available only in English. Interviewed representatives in three of six districts, however, report using bilingual staff or translators to administer assessments with children whose primary language is not English. More than half of schools (57%) with a kindergarten assessment process currently make accommodations for children with special needs. However, an additional 13% of schools, and most district representatives interviewed report excluding children with special needs from the assessment process.

Most schools with a kindergarten assessment process report sharing assessment results with teachers and principals (99%), parents (83%), and district staff (64%). All interviewed district representatives report sharing the assessment results with teachers, and most also share the results with district staff and parents.

Finally, 85% of schools with a kindergarten assessment process report that participation in the kindergarten assessment process is required and that families are not given the option not to participate.

STAKEHOLDER PRIORITIES FOR A STATEWIDE KINDERGARTEN ASSESSMENT PROCESS

This section summarizes information gathered from a variety of Washington State stakeholders on their priorities for a statewide kindergarten assessment process in the state. The bulk of the information was collected during the last two weeks of October 2008 through an online survey that was posted on the DEL Web site in English and Spanish, along with audiovisual presentations in both languages that introduced key concepts related to conducting a kindergarten assessment process. A total of 1,476 stakeholders, including respondents from all 39 counties and 12 Washington Indian Tribes, completed the survey. Nearly 91% of stakeholders ($n = 1,349$) responded to all survey items, and 9% ($n = 127$) submitted surveys with some incomplete responses (i.e., skipped some survey items). Most percentages provided in this section of the report were calculated excluding missing and “*Not applicable; there should not be a kindergarten assessment process*” responses.²⁸ Survey respondents represented diverse groups including:

- School principals, teachers, and staff ($n = 392$)
- Early care and education (ECE) providers and program directors ($n = 350$)
- Parents and other family caregivers ($n = 327$)
- Early learning and assessment experts, including researchers, policy-makers, and professors ($n = 186$)
- Educational Service District (ESD) and district administrators and staff ($n = 112$)
- Washington Indian Tribe representatives ($n = 30$)
- Others ($n = 79$).

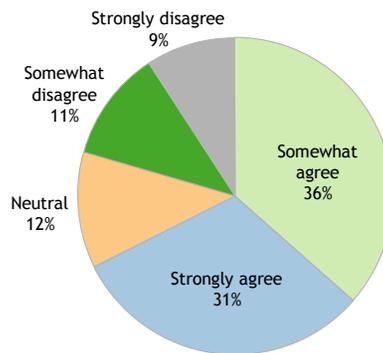
A complete description of the survey methodology and full results are provided in Appendix B-2. Survey information is augmented by qualitative information gathered through focus groups with early learning, assessment, and cultural competency experts; a listening session at the Washington State Tribes Tribal Leaders Congress on Education (Tribal Congress); and telephone interviews conducted by DEL staff with 20 stakeholders.

Although information presented in this section was collected from a broad range of stakeholders across the state, the priorities described herein should not be viewed as representative of all constituents in the state because participants were invited to complete the survey or participate in focus groups and interviews through targeted and purposive outreach strategies and were not randomly sampled from the population at large. As will be shown, there is both variation and consensus for various aspects of a kindergarten assessment process among Washington State’s stakeholders. Thus, there are areas in which further dialogue and consensus building may be necessary when moving forward in the planning process.

Agreement with the idea of conducting a statewide kindergarten assessment process.

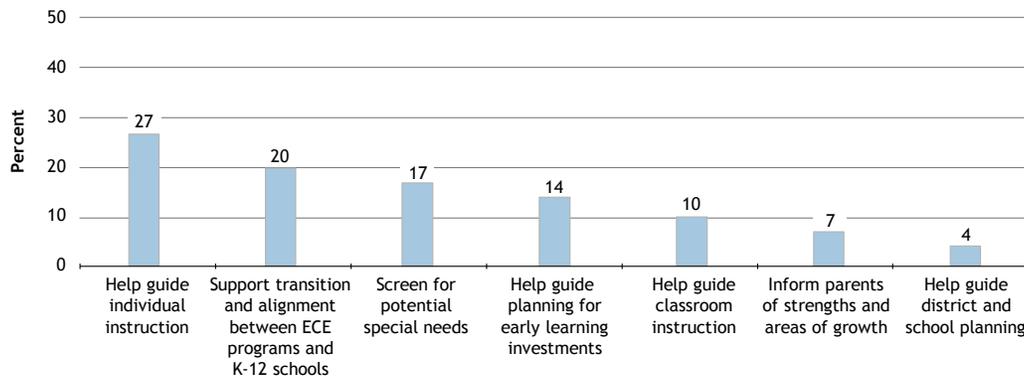
Stakeholders in Washington State have diverse opinions with regard to the development of a statewide kindergarten assessment process. Although the majority of stakeholders strongly or somewhat agree (67%) with the idea of developing a statewide process, 20% strongly or somewhat disagree (Exhibit 5). Similarly, most of the individuals who participated in additional qualitative data collection agree with the idea of conducting a statewide assessment process, but some do not. Those who do not agree with the idea express concern about potential misuses of data, the costs of implementing a process statewide, and not being able to appropriately include children from diverse backgrounds in the process.

Exhibit 5. Stakeholder Agreement with Idea of Developing a Statewide Kindergarten Assessment Process (N = 1,476)



Purposes for conducting a statewide assessment process. Stakeholders who completed the survey support a variety of purposes for conducting a statewide assessment process. Those who participated in focus groups and members of the Tribal Congress express a desire for the state to explicitly define the purpose of a kindergarten assessment process in Washington State. Focus group participants note that developing a process with too many purposes may be both unrealistic and inappropriate. They also note that determining the purpose of the assessment process will drive all subsequent decisions about areas to be measured, types of assessments to be used, who collects the data, and with whom and how the data are shared.

Guiding instruction for individual students is cited as the most important purpose for conducting a statewide assessment process across stakeholder groups who completed the survey (27%), followed by supporting transition and alignment between ECE programs and K-12 schools (20%) and screening children for potential developmental delays or other special needs (17%) (Exhibit 6).

Exhibit 6. Most Important Purpose Identified by Stakeholders (n = 1,304)

Parents interviewed by DEL staff shared their desire that an assessment process should be used “to better develop the talents that our children already have” and “to help children reach their full potential.” ECE staff who completed the survey identify supporting transition and alignment between ECE programs and K-12 schools as the most important purpose for an assessment process. Representatives from Washington Indian Tribes who completed the survey and members of the Tribal Congress identify screening as the most important purpose for conducting an assessment process. Participants in the focus groups have differing opinions on the appropriateness of screening children for potential developmental delays or other special needs as a primary purpose for conducting a statewide assessment process, with some supporting this purpose and others not.

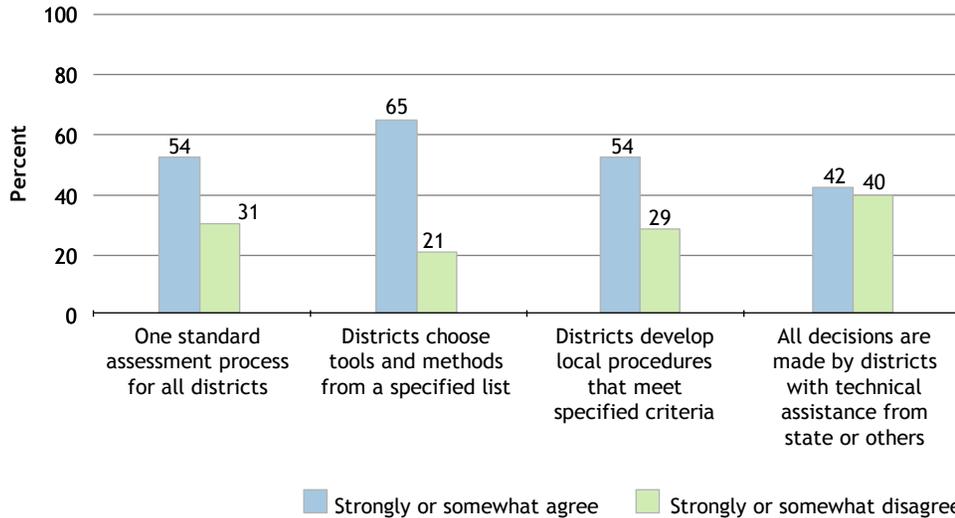
Another purpose for conducting an assessment process mentioned by early learning and assessment experts is to evaluate early education programs “so that parents know if programs are effective at what they intend to do.” However, other focus group participants warned that conducting an assessment process solely for accountability purposes is “unethical” and that there has to be “some tangible benefit [of the process] for children and teachers.” Others also mentioned that accountability as a primary purpose may encourage ECE providers or teachers to “teach to the test rather than focusing on the individual strengths of each child.”

Areas of children’s skills and development. In general, stakeholders think that measurements of multiple areas of children’s skills, development, and competencies are important to include in a statewide assessment process. Survey respondents indicate that social and emotional development and language, communication, and literacy are of utmost importance to include. The strength of stakeholders’ desire to measure social and emotional development contrasts greatly with the small number of schools in Washington that currently measuring this area of development. Across stakeholder groups, the majority of survey respondents (86%) strongly or somewhat agree that a statewide assessment process should be comprehensive and capture information on all five areas of development (i.e., social and emotional development; language, communication, and literacy; physical well-being, health, and/or motor development; cognition and general knowledge; approaches toward learning). Early

learning, assessment, and cultural competency experts and Tribal Congress members agree that an assessment process should be comprehensive and should not “narrowly focus on academic skills.” Tribal Congress members specifically mentioned sense of identity, culture, and respect for elders and children’s disposition for learning (e.g., curiosity, courage, and playfulness) as additional areas of children’s skills and development to be included in a holistic process. Focus groups and Tribal Congress members also feel that an assessment process ideally should include measures of schools’ readiness for children.

Approaches to implementation of a kindergarten assessment process. In general, stakeholders agree with some level of standardization in the assessment implementation approach (Exhibit 7). Requiring districts to choose tools and methods from a specific list is the implementation approach with greatest support from all but one of the stakeholder groups. Representatives from Washington Indian Tribes more strongly agree with a process in which districts are able to develop local procedures that meet a specified set of criteria or in which all decisions are made by individual districts with the provision of technical assistance. They also more strongly disagree with the idea of requiring one standard assessment process for all districts.

Exhibit 7. Stakeholder Agreement with Potential Implementation Approaches
(n = 1,254 – 1,262)

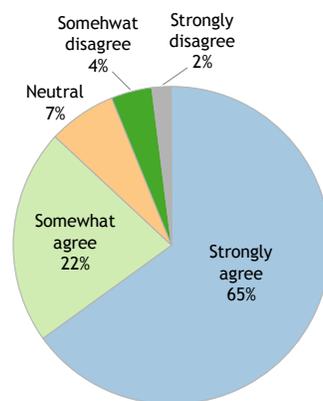


Approaches to collecting information on children’s skills and development. Survey respondents hold favorable opinions of various approaches for collecting information on children’s skills and development, including the use of direct assessments (77%); portfolios and work samples (76%); and checklists, questionnaires, and rating scales (74%). School staff most strongly agree with the use of direct assessments, while ECE staff, early learning experts, and representatives from Washington Indian Tribes agree less with their use.

Focus group participants and Tribal Congress members say that an assessment process should involve assessors who speak the child’s primary language and are from or know the child’s culture and community. Focus group participants also say that assessment processes should allow for accommodations for children with special needs, should be implemented in an environment that is familiar to the child, and should include multiple sources of information.

The majority of stakeholders (87%) who completed the survey strongly or somewhat agree that a kindergarten assessment process must include information gathered from parents (Exhibit 8). Participants in both focus groups and Tribal Congress members strongly reiterate this point. Cultural competency experts suggested that a benefit of conducting an assessment process is to “bring the family into the conversation with their child’s school and teacher early” and to “validate and empower parents as their child’s first and best teacher.” The strong desire to include information from parents is not reflected in current assessment processes being used by the vast majority of schools.

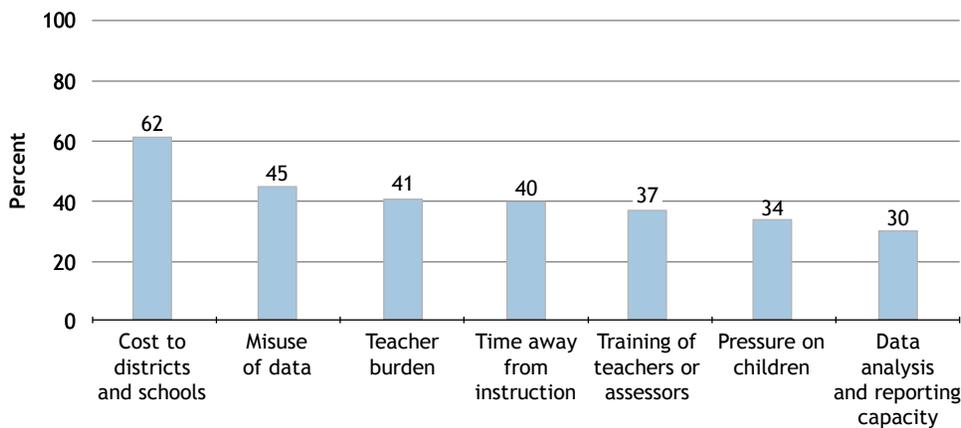
Exhibit 8. Stakeholder Agreement with Necessity of Including Parent Input
(n = 1,275)



Finally, there is wide variation in the amount of instructional time stakeholders who completed the survey are willing to invest in conducting a statewide kindergarten assessment process. One-quarter (25%) of stakeholders indicate they would invest up to 1 hour of instructional time per child per year for assessment, and 45% indicate a willingness to invest more than 1 hour of time. Some respondents are less willing to spend instructional time on a kindergarten assessment process, with 16% wanting to spend less than 30 minutes per child and 14% not wanting to invest any instructional time in assessment. Many (73%) of those not wanting to invest any time in an assessment process also indicate that they strongly disagree with the idea of a statewide kindergarten assessment process.

Potential implementation challenges. Stakeholders were asked how significant a challenge to implementing a statewide kindergarten assessment process they believed seven issues might be. The majority of survey respondents (62%) and most focus group participants consider cost to be a “very significant” challenge to implementing a statewide kindergarten assessment process (Exhibit 9). Other “very significant” challenges identified by stakeholders who completed the survey are potential misuse of data (45%), teacher burden (41%), time away from instruction (40%), training of teachers or assessors to collect and use assessment data effectively (37%), pressure on children (34%), and capacity to analyze and report data (30%).

**Exhibit 9. Challenges Anticipated to Be Very Significant by Stakeholders
(n = 1,347 – 1,355)**



For early learning experts, ECE staff, and representatives from Washington State Indian Tribes who completed the survey, potential misuse of data is also a significant anticipated challenge. Washington Indian Tribes survey respondents and Tribal Congress members express concerns about pressure on children, commenting that the assessment process might negatively affect native children’s self-esteem and social-emotional development. Tribal Congress members also suggest that Washington Indian Tribes be “given an opportunity to provide their own local interpretations of native children’s assessment data as well as the opportunity to refute any claims made by the state or researchers that might not reflect native cultural identities.”

Additional challenges identified by focus group participants include the difficulty of identifying assessment approaches that are both valid and culturally responsive and of adequately training assessors. It was noted that assessors, be they teachers or outside specialists, need to be trained not only in the administration of the assessment methods, but also in how to interact with children, understand their cultural backgrounds and personal histories, and interpret and share the results. Focus group participants and members of the Tribal Congress also anticipate challenges related to inappropriately labeling children in a negative manner or using assessment data for placement or classification in the school system. Finally, an additional anticipated challenge noted by individuals who reviewed this draft report is building

consensus among stakeholders about the various attributes of a statewide kindergarten assessment process, including key purposes, tools to be used, and how to share data.

Suggestions for next steps. Most survey respondents (87%) indicate that more than 6 months or perhaps more than a year of planning time is needed for a dialogue between the state and stakeholder groups before piloting a statewide kindergarten assessment process. Focus group participants and Tribal Congress members also recommend additional planning time and suggest that the planning process “be transparent and include broad and meaningful involvement of diverse stakeholders.”

RECOMMENDATIONS AND CONSIDERATIONS

In this section, we present recommendations and considerations for initial steps toward the development of a statewide kindergarten assessment process for Washington State. Developing such a process will provide Washington State with an opportunity to focus resources to better support families, parents, schools, and communities to help children succeed in kindergarten and beyond. However, as noted earlier, developing a statewide kindergarten assessment process is complex because it involves multiple interrelated decisions and requires setting priorities across a broad range of stakeholders. Thus, it is important to consider the following issues and recommendations as a process is developed.

Consider stakeholder support for a statewide kindergarten assessment process. The initial stakeholder input described in this report shows that although there are diverse opinions about the development of a kindergarten assessment process, the majority of stakeholders who completed the survey strongly or somewhat agree (67%) with the idea of developing a statewide process, while 20% strongly or somewhat disagree. Those who disagree with the idea express concern about the costs of implementing a process statewide, potential misuse of data, and not being able to appropriately include children from diverse backgrounds in the process. Also, until the purpose or purposes are defined, some stakeholders are reluctant to form an opinion about their level of support for a statewide kindergarten assessment process. Thus, it will be important to clarify goals and determine how stakeholder concerns could be addressed during the next planning phase, so that a clear understanding of what a statewide kindergarten assessment process could be and accomplish is established.

Identify the key purpose(s) of a kindergarten assessment process early in the planning phase. Defining the purpose(s) of a kindergarten assessment process up front is important because all other attributes and decisions about the assessment process flow from the purpose(s).^{18, 29} For instance, the types of assessment tools, individuals used to collect assessment data, training needed, and costs of an assessment process all vary according to the purpose(s) of the assessment process.

Washington State stakeholders feel that careful consideration of purposes must be addressed as a first step in an extended planning process leading to a pilot assessment process. Furthermore, the purpose(s) selected must be clearly articulated and broadly communicated to the wide range of stakeholders across the state.

Stakeholders who completed the survey indicate the following as the most desired purposes:

- Guide instruction for individual students (27%).
- Support transition and alignment between ECE programs and K-12 schools (20%).
- Screen children for possible developmental delays or other special needs (17%).

Regardless of the purpose, stakeholders strongly endorsed the view that an assessment process should benefit children, support their learning, help children reach their full potential, and focus on their strengths. However, many of the early learning experts who provided input note that developing a process that meets multiple purposes simultaneously may be both unrealistic and inappropriate.

Choose the characteristics of children’s early learning and development that will be measured in the assessment process, as well as the degree of comprehensiveness. One of the major decisions that must be made about a kindergarten assessment process is the degree to which the process focuses on early learning and children’s skills and abilities comprehensively across multiple areas of development or focuses more narrowly on one or a few areas. All stakeholder groups prefer a comprehensive approach. However, most Washington schools currently use a process that measures only one or two areas of children’s skills and development. Furthermore, although stakeholders identify measures of social and emotional development as of utmost importance to include in a kindergarten assessment process, few Washington schools’ current assessment processes include measures of this area of development.

If future deliberations lead to the adoption of a more comprehensive kindergarten assessment process, its feasibility in terms of needed time and resources must be weighed carefully. A comprehensive approach including in-depth assessments in multiple areas of children’s development could require significant time and resources. On the other hand, a comprehensive approach that gathers information about a range of areas at a more general level using an observational checklist could require less time and fewer resources.

Determine how the areas of development to be measured in a kindergarten assessment process will be aligned with specific frameworks about children’s early learning and school readiness. Some states have developed kindergarten assessment processes that align or connect with the areas of development and skills outlined in their early learning guidelines, school readiness frameworks, or assessment guidelines. In the case of Washington State, future planning must address whether or not to align kindergarten assessment processes with the *Washington State Early Learning and Development Benchmarks*,³⁰ which set goals about skills and competencies for young children, and/or OSPI’s recently published *A Guide to Assessment in Early Childhood*, which provides background and context, practical guidance, recommendations, and resources for the assessment of young children.²⁵

It is also important to decide whether to expand on the existing frameworks to incorporate additional areas of development valued by diverse populations. For instance, stakeholders from Washington State Indian Tribes identify sense of identity, culture, and respect for elders as important early learning outcomes. Stakeholders recommend that more input be gathered from the many diverse groups in Washington State about the areas of children’s skills and development to be measured during the assessment process, as well as how closely these areas should align with existing work done in the state.

Make decisions about methodology or approaches to be used for conducting a kindergarten assessment process, including those sensitive to cultural and socioeconomic differences influencing the development of young children. Both the literature on assessment of young children and stakeholders recognize the many challenges of identifying assessment approaches that can yield accurate and useful information about what young children know and can do. Further, they recognize that special attention needs to be paid to conducting assessments that are culturally and linguistically responsive. Assessment tools or processes that are linguistically or culturally inappropriate may underestimate children's true abilities and lead to inaccurate conclusions about children's competencies.^{4, 11-13, 31}

For children whose primary language is not English, assessments using observational methods and work samples of children's performance can provide a fuller and potentially more accurate picture of children's abilities than other methods.^{4, 11-13, 31-34} Other highly recommended strategies for ensuring cultural and linguistic competency include using only assessment tools with norms for the groups being assessed, using culturally and linguistically appropriate assessors, including parent input as part of the assessment information, ensuring culturally relevant content, and training assessors to ensure that they do not misinterpret children's test-taking styles.

Make decisions about methodology or approaches for inclusion of children with disabilities and other special needs. Very few tools for assessing young children include accommodations for children with disabilities and other special needs. In addition, the normative samples used to develop most assessment tools have included few or no children with disabilities. Even if they are included, the numbers and types of disabilities included in the normative samples are often limited and do not reflect the wide range of possible disabilities (e.g., physical disabilities, deafness, vision impairment, cognitive disability syndromes, behavior disorders).^{11, 35-38} Assessment tools developed specifically for each type of disability simply do not exist.

While more than half (57%) of the schools in Washington State with a kindergarten assessment process report making accommodations for children with special needs during their kindergarten assessment processes, 13% of schools and most district representatives interviewed report excluding children with special needs from the assessment process. Highly recommended strategies for including children with disabilities and other special needs include providing needed supports, allowing for alternative ways to indicate responses, allotting extra time, and including parent input as part of the assessment information.

Make decisions about data collection procedures, including considering different options and alternatives. During the next phase in planning for a kindergarten assessment process, broad stakeholder input needs to be sought about many specific implementation and data collection decisions. This input should include identifying various acceptable options and weighing the tradeoffs for each alternative. As mentioned earlier, some decisions and choices flow from the purpose(s) of the assessment. Other decisions and choices will be dictated by local preferences, best practices, costs, and available resources.

Consider including measures of schools' readiness for children in the assessment process.

Focus group participants and Tribal Congress members suggest that a statewide kindergarten assessment process gather information not only on entering students but on the readiness of schools to serve children as well. Best practices and early learning frameworks also support assessing the readiness of schools and communities. Components of schools' readiness for children include class size, teacher-child ratios, teacher preparation, parent involvement policies, plans for transition between ECE programs and K-12 schools, and instructional practices to support the learning of diverse groups of children. Including measures of schools' readiness for children is also in line with the shared mission of DEL, OSPI, and Thrive to support families, parents, schools, and communities to help children succeed in kindergarten and beyond. Although important, including measures of schools' readiness for children in the assessment process will require additional data collection strategies and may increase total costs and time of the process.^{3, 44, 45}

Consider the costs and time a kindergarten assessment process could require. As mentioned earlier, many stakeholders who completed the survey (62%) anticipate that cost will be a very significant challenge to implementing a statewide kindergarten assessment and that the process must be a state-funded mandate for it to succeed. Other stakeholders recommend that the state weigh the costs of implementing a kindergarten assessment process against other uses of funds, such as investing more funds in early learning services or elementary schools. The costs and time required to conduct a kindergarten assessment process will depend on the decisions made regarding all of the previous considerations because they affect the selection of materials, training, choice of assessors, and data analysis and sharing components that constitute the process itself. The ranges for cost and time related to each of these kindergarten assessment process components, described below, are based on a review of *Early Childhood Measures Profiles*.⁴⁶

- **Materials.** Costs for direct assessment materials vary, with some published and commercially available materials costing as little as \$1 per student and others with more reliability and validity costing \$300 to \$900 per testing kit (a kit can be used repeatedly, but with only one student at a time). Published materials for conducting observational measures can cost from \$90 to \$300 per classroom or teacher. If assessment materials are developed to align with state learning and development benchmarks, additional costs may be incurred. If measuring multiple areas of children's skills and development, there may be a need to use more than one type of assessment materials, with costs increasing for multiple tools. Some assessment tools, however, do provide comprehensive measures, such as the Early Development Instrument (EDI) and other teacher checklists like that included in the Alaska Kindergarten Developmental Profile.
- **Training.** The costs and time involved in training depend on the assessment materials selected and method of training used. At the high-cost end of the spectrum, training could involve one- or multiple-day seminars for all kindergarten teachers or for one lead teacher per school (i.e., train the trainer). Lower-cost training options include

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training packets reviewed collectively through telephone conference calls or online training modules.

- *Teacher or assessor time.* The time required by teachers or assessors also varies across assessment methods and assessment tools. Some assessment tools require as little as 10 minutes per student; many require up to 30 minutes; a few take up to 60 minutes per administration. Some states pay teachers for their time assessing children (e.g., \$100 per class) or employ substitute teachers to free up teachers' time to complete assessment protocols. Costs for external assessors vary and can be up to \$200 per student for a comprehensive assessment.
- *Data analysis and sharing.* The purpose(s) of the assessment process will determine whether and how the information gathered on individual students is most appropriately aggregated, analyzed, and reported. For example, if the sole purpose is to help guide instruction for individual students, teachers may be able to use individual results effectively without any higher-level analysis or without sharing beyond their classroom. However, if the purpose is to guide broader planning at the school, district, or state level, then costs for data collection, processing, and analysis increase dramatically. Costs could include those related to entering and analyzing data, preparing statewide, district-level, and/or school-level reports (and possibly individual student reports for parents), and training for teachers on how to use assessment data effectively. Total long-term costs related to data analysis and sharing could be reduced by investing in a state-level Web-based data system and staff. Providing analysis support at the state level also could reduce overall costs and the comparability of data across districts compared with each district conducting its own analysis. To support use of data, the state also could provide technical assistance to schools and districts. Finally, costs of data analysis and reporting also will depend on the number of times per year that information is collected on kindergarten students.
- *Pilot phase.* Given that several key decisions have not yet been made that will affect the final cost of a pilot assessment process, we can provide only a rough estimate of \$1,500,000 for the pilot phase. This estimate is based on an estimate for a similar statewide project prepared by OSPI in 2007. Activities and costs included in the OSPI budget were broken down over two years. In year one, the budget for planning and preparation for the pilot was \$759,500. In year two, the budget to initiate the pilot phase and prepare for statewide implementation was \$938,700.
 - The budget included in the OSPI estimate included some activities that have been completed under the current planning contract (e.g., inventorying existing practices in Washington and other states). However, much of the planning and implementation work included in the OSPI budget estimate remains to be done. These tasks include researching and identifying the most appropriate early assessment tool(s) and processes; selecting assessment tool(s) and processes to be piloted; piloting the use of the kindergarten assessment process; evaluating the results of the pilot for statewide implementation; and preparing for statewide implementation. These tasks align with the activities in the recommendations and considerations presented in this section of the report.

SUGGESTED IMPLEMENTATION PLAN

In this section, we present a possible implementation plan for developing and conducting a pilot of the kindergarten assessment process and supporting the use of the process in a voluntary use phase. The implementation plan and timeline will depend on a variety of factors, including the success of gathering sufficient input from representatives across the state, the selected assessment purpose(s), and available funding. The recommended implementation plan includes two phases that align with two biennial legislative sessions. The first phase, *Planning and Pilot Phase (2009 – 2011 Biennial Legislative Session)*, will be used for additional planning and stakeholder decision-making and for conducting a pilot. The second phase, *Voluntary Use Phase (July 2011 – June 2013 Biennial Legislative Session)*, will be used to provide support to districts that choose to implement the kindergarten assessment process.

- *Planning (2009 – 2010)*. More planning and gathering of input from Washington stakeholders is needed to ensure broader representation of stakeholder groups that reflect the cultural and linguistic diversity of Washington State. This planning process also should gather additional input from ECE programs and providers and from school districts about how a statewide process could complement their local assessment processes and not duplicate them.

During this 12-month planning period, a task force/council should oversee the development of a comprehensive plan for a statewide kindergarten assessment process. The Early Learning Advisory Council or another existing council, which includes and/or works with a wide array of stakeholders (including psychometric, cultural competency, and early learning experts; constituent groups such as parents, ECE providers, and teachers; representatives from diverse cultural and linguistic groups; and representatives from DEL, OSPI, and Thrive), could serve as an oversight body to a key group of stakeholders who are focused specifically on this planning effort. The task force/council could work with stakeholders from throughout the state to oversee the collection of input and decision-making regarding the following elements:

1. Deciding the purpose(s) and scope of the kindergarten assessment process
2. Selecting data collection tools and methods and data sources (e.g., children, parents, ECE providers)
3. Identifying funding sources and calculating projected implementation costs
4. Identifying a training plan and methods of implementation
5. Identifying data storage, analysis, and reporting methods
6. Developing a plan for how schools and/or districts will be selected to pilot the project.

OSPI, in collaboration with DEL and Thrive, could coordinate the recruitment of schools, distribution of materials, training of teachers and assessors, and collection and analysis of data from schools for the pilot.

- *Pilot (7/2010 – 6/2011)*. OSPI, in collaboration with DEL and Thrive, could hire a consultant or dedicate staff to oversee the kindergarten assessment pilot. The pilot should include large enough samples of districts (e.g., 20) and kindergarten children (e.g., 2,000) to be able to make reliable statements about the effectiveness of the assessment process for diverse student and school populations across the state. The pilot also should gather feedback from teachers, parents, and other key stakeholders about the implementation process and conduct a more detailed analysis of costs. A report that summarizes the results of the pilot phase should be shared with stakeholders and include recommendations for refining the kindergarten assessment process for the voluntary use phase.
- *Voluntary Use (7/2011 – 6/2013)*. During the two years of the voluntary use phase, OSPI, in collaboration with DEL and Thrive, could oversee the provision of technical support to districts that choose to implement the kindergarten assessment process. Information and results from the voluntary use phase will be used to guide decision-making for a time certain when schools districts must offer the assessment statewide.

“There needs to be a lot more time for discussion and planning [in regard to a kindergarten assessment process]. You should not rush such an important process...It could take a year just to decide what is appropriate to measure in one domain.”

—A cultural competency expert

“We need to have consensus and buy-in across the state on what we want children to know when they enter school so we can all work toward a shared goal, and so that funding can be focused on strategies focused on these outcomes.”

—A cultural competency expert

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“Washington Head Start Study” bill



The 2008 Washington State Legislature passed legislation that required a study with recommendations for aligning the Washington State Department of Early Learning's Early Childhood Education and Assistance Program (ECEAP) with the federal Head Start program (RCW 43.215.125: Washington head start program proposal) and a report due to the Governor and Legislature by December 1, 2009. The Legislature earmarked \$250,000 for this study, with funds ending on June 30, 2009 (2008 Enacted Operating Supplemental Budget ESHB 2687 page 347-48, Section 616).

This report provides a brief interim overview of the work to date and an initial comparison of these two programs and their respective performance standards. Because of the current economic situation in our state and the nation, the work mandated under this legislation has been suspended. The Department of Early Learning (DEL) does not possess the internal capacity to concurrently maintain the quality of its ECEAP program and independently conduct this intensive, in-depth study.

BACKGROUND

Washington State established ECEAP in 1985 to serve as the state-funded counterpart to the federal Head Start preschool program. When it was created it was aligned with Head Start; however, over time, ECEAP diverged from the federal program in order to meet specific local needs. However, both comprehensive early learning programs are "whole child and family-focused," designed to help low-income, at-risk children succeed in school and life by offering classroom learning, family support and advocacy services, and an array of developmentally targeted services such as child health, vision and dental screenings, nutritious meals and kindergarten transition planning.

Since DEL's inception in 2006, the department significantly enhanced both the quality and availability of ECEAP, raising standards for classroom hours, implementing consistent state-wide student outcome measures for children's social and emotional development, and prioritizing at-risk families that have been involved with the child welfare system. In 2008, the National Institute for Early Education Research ranked ECEAP among the highest quality state-funded preschool programs in the nation. The historic 37 percent program expansion in 2007-2009 increased families' access. This school year, more than 8,200 children will be enrolled in ECEAP in 38 Washington counties.

Within the state, there is a combined total of 48 Head Start grantees and ECEAP contractors: 20 provide ECEAP-only; eight provide Region X Head Start but not ECEAP; and 20 organizations provide both ECEAP and Region X Head Start. The 40 ECEAP contractors include school districts, educational services districts, colleges, local governments and non-profit organizations. Some contractors subcontract parts of ECEAP services; there are 113 ECEAP subcontractors ranging from child care centers to public school districts.

STATUS OF THE STUDY

To launch the work in a collaborative manner, on June 4, 2008, DEL reviewed the legislation with its Early Learning Advisory Council (ELAC), which includes an expansive array of stakeholders including parent representation, state legislators, the early learning community, K-12 community, Tribal Nation representation, Thrive by Five Washington, state agencies and the Governor's Office. A workgroup was proposed to provide input and guidance to DEL's approach to fulfilling the requirements, and it was suggested that ECEAP-only program directors be engaged to allay concerns regarding the study's purpose. Also in June, DEL Director Bosworth convened the suggested meeting with ECEAP-only program directors and the lead sponsor of the legislation, Rep. Roger Goodman, who serves on ELAC. The meeting achieved a shared understanding of the purpose and requirements of the statute.

DEL convened a collaborative workgroup to develop a request for proposals (RFP) to obtain the research and consultancy expertise needed to fulfill the extensive legislative requirements. In addition to DEL staff, members of DEL's "Washington Head Start Study" workgroup included:

- Jim Skucy, executive director, Benton-Franklin Head Start /DEL Early Learning Advisory Council member
- Joe Varano, program manager, Snohomish County ECEAP
- Rudy Taylor, Head Start parent, Kitsap Community Resources Head Start
- Sage McLeod, coordinator, San Juan ECEAP
- Lisa Horn, director, Suquamish Tribal Head Start
- Joan Robertson, family services coordinator, Deer Park ECEAP
- Enrique Garza, director, Washington State Migrant Council, Migrant/ Seasonal Head Start
- Joel Ryan, executive director, Washington State Association of Head Start and ECEAP

The workgroup finalized the RFP in August; however, due to the state's suspension of personal services contracts, DEL did not release it. Elements of the RFP included (non-exhaustive list):

- Conducting a thorough evaluation of the differences between ECEAP and Head Start performance standards, eligibility requirements and other components;
- Collecting comparative data regarding child performance, readiness, and educational outcomes for Washington's existing Head Start and ECEAP programs;
- Determining alignment between ECEAP, Head Start and related areas of the Washington Learns report;
- Recommending which ECEAP performance standards should be changed to align with federal Head Start, and what potential implications such changes would have on state flexibility, programs and families; funding and DEL infrastructure;

- Collecting input from specific Washington stakeholders, including Tribal Nations Head Start Programs, ECEAP providers and Migrant/Seasonal Head Start programs;
- Identifying required changes in Washington statute related to ECEAP and whether federal waivers or other actions were needed through consultation with federal Region X representatives; and,
- Recommending a timeline, strategy and funding needs to implement a statewide, state-funded program for children ages birth to 3, similar to the federal Early Head Start program.

In addition, DEL arranged for a no-cost facilitator to support the Washington State Association of Head Start and ECEAP's offer to conduct a stakeholder feedback session in December 2008 related specifically to DEL's preliminary Head Start and ECEAP performance standards comparison detailed below.

ECEAP & HEAD START PERFORMANCE STANDARDS: SIMILARITIES

ECEAP and Head Start are similar in many ways and therefore could align many performance standards easily. Areas of similarity include:

- Goal of supporting school readiness.
- Comprehensive services including high-quality preschool education, intensive family support, health coordination, and nutrition services.
- Child and family demographics.
- Prioritization of children most in need of services, based on low income, involvement in the child welfare system, developmental delays and disabilities or environmental risks.
- Developmentally and culturally appropriate curriculum, with positive child guidance.
- Child screening and assessment, ongoing observation, individualized curriculum and guidance. Support and coordination for children with special needs. Requirement to use assessment results for planning and individualization.
- Facility health and safety requirements (similar to licensed child care).
- Health status monitoring, medical and dental screening and follow-up care, immunizations, and dental hygiene.
- Access to mental health support for children and families.
- Nutritious meals and snacks provided during preschool day.
- Parent participation in meaningful program governance, decision-making, and leadership development.
- Individualized family support services, focusing on family strengths, to set and follow-up on family goals, access community resources, and support kindergarten readiness.
- Community partnerships that maximize and streamline health, education, and social services. Community kindergarten transition planning.
- For licensed child care providing ECEAP or Head Start services, technical assistance from DEL child care licensors.
- Annual program self-assessment.

ECEAP & HEAD START PERFORMANCE STANDARDS: POINTS OF COMPARISON

The following chart shows where there are differences in ECEAP and Head Start performance standards, which should be considered during any discussion of alignment.

| | <i>ECEAP (State)</i> | <i>Region X Head Start (Federal)</i> |
|--|--|--|
| Number of funded slots for 3- and 4-year olds | 8,226 | 9,718 |
| Average funds per slot | \$6,659 | \$8,725 |
| Income eligibility | <p>At least 90 percent of enrolled families must be at or below 110 percent of Federal Poverty Guidelines</p> <p>Categorical eligibility of children in families receiving TANF cash grants, but not child care subsidy.</p> <p>Maximum 10 percent of slots available to children from over-income families, based on developmental or environmental risk.</p> | <p>At least 90 percent of enrolled families must be at or below 130 percent of Federal Poverty Guidelines. Priority to families at or below 100 percent FPG; maximum 35 percent can be between 100 and 130 percent FPG.</p> <p>Allows categorical enrollment of families receiving any TANF service, including child care subsidy (up to 200 percent FPG in WA).</p> <p>Maximum 10 percent of slots available to children from over-income families.</p> |
| Age eligibility | <p>Children must be at least 3 years old, but not yet 5 years old, by August 31 of the school year.</p> <p>No difference between ECEAP and Head Start for age eligibility.</p> | <p>Children must be at least 3 years old by date used to determine eligibility for public school in the community in which the Head Start program is located (Aug. 31 in Washington).</p> <p>Children must be allowed to remain in Head Start until kindergarten or first grade is available.</p> |

| | <i>ECEAP (State)</i> | <i>Region X Head Start (Federal)</i> |
|-----------------------------------|--|--|
| Children with disabilities | <p>No set-aside of slots for children with disabilities, though they are enrolled by income-eligibility, or as part of 10 percent of enrollment allowed over-income.</p> <p>Must conduct developmental screenings within 90 calendar days of each child’s first day of class, to identify children who may need further evaluation.</p> <p>Must refer children for further assessment, if needed, based on screening, observation, and/or parent concerns.</p> <p>Must follow up with parents to ensure referred children receive needed developmental services. If a child is identified as having special needs, contractors must work with the local education agency (LEA) to develop an individualized education program (IEP) that identifies and plans for needed services.</p> | <p>At least 10 percent of slots must be available to children with disabilities.</p> <p>Disabilities services plan, updated annually, outlines all of the agency’s efforts to serve children with disabilities.</p> <p>Must actively locate and recruit children with disabilities, including those with severe disabilities.</p> <p>Designated disabilities coordinator coordinates with health, mental health and education coordinators on appropriate screening, assessment and services.</p> <p>Must arrange for further, formal evaluation of children identified as possibly having a disability.</p> <p>Must refer child to the LEA for evaluation. If the LEA does not evaluate the child, Head Start is responsible for arranging or providing evaluation.</p> <p>Interagency agreements with LEAs.</p> <p>Must budget grantee funds to assure special needs identified in the IEP are fully met and address the implementation of the disabilities service plan.</p> <p>Must attempt to participate in the IEP meetings and placement decision.</p> <p>Must make vigorous efforts to involve parents in IEP process and inform parents of rights under the IDEA. Help parents transition children from Head Start to public school or other placement, beginning early in the program year. Must notify the school of the child's planned enrollment prior to the date of enrollment.</p> |

| | <i>ECEAP (State)</i> | <i>Region X Head Start (Federal)</i> |
|---|---|--|
| Enrollment Requirements | Fill all slots by 30 days of class start. Fill each vacancy within 30 days. | Fill all slots by first class day. Fill each vacancy within 30 days. |
| Preschool classroom hours per year | 320 hours required. (Actual average 394 hours) Minimum of 2.5 hours per class session. | 448 hours required. (Actual average 540 hours) Minimum of 3.5 hours per class session. |
| Staff qualifications | Lead teachers and family support specialists must have a related AA or higher degree. Assistant teachers and family support/health aides must have a CDA or 12 related credits. Staff who do not meet qualifications are allowed five years to complete a professional development plan. | All lead teachers must have a CDA, AA, or BA; 50 percent must have an AA or higher by 2008. (A BA requirement is in the pipeline.) There are no requirements for assistant teachers or family support staff. 180 day waiver of qualifications, for teachers. Hiring preference for current and former Head Start parents. |
| Class size | There can be no more than 20 children per class/group. | For 4-year-olds, average class size must be between 17 and 20 children, with no more than 20 in any class. If the same staff teach different groups in the morning and afternoon, the average of these classes must be between 15 and 17, with no more than 17 in any class. For 3-year-olds, average class size must be between 15 and 17 children, with no more than 17 in any class. If the same staff teach different groups in the morning and afternoon, the average of these classes must be between 13 and 15, with no more than 15 in any class. |

| | <i>ECEAP (State)</i> | <i>Region X Head Start (Federal)</i> |
|--|---|---|
| Staff:child ratio | Minimum 1:9 adult/child ratio. | Minimum 1:10 ratio for 4-year olds. For 3-year-olds, it's 2:17 . |
| Training and technical assistance | DEL provides extensive training on ECEAP performance standards, as well as training and technical assistance for individual contractors as needed. DEL contracts for DECA training for ECEAP contractors. | Separate national training and technical assistance system, co-located in each state, and in regional offices (Seattle). In addition, each grantee receives funds that can only be used for staff development. |
| Parent-teacher conferences | Minimum three hours per year. Home visits are not required. | Minimum four times a year, at least twice at home visits. No minimum hours requirement (except in home-base models). |
| Family support Services | Minimum of three hours per year. Content of family support services is same in ECEAP and Head Start. | No specified number of hours. Content of family support services is same in ECEAP and Head Start. |
| Screenings (developmental, vision, hearing, growth) | Within 90 days. | Within 45 days. |
| Outcomes data | Data collected on extensive child and family demographics, health measures, social-emotional development, staff qualifications. | Must collect data in eight developmental domains, analyze it three times per year, and use it for program planning. This is not collected on a state or national level. Child demographic information is collected. |

| | <i>ECEAP (State)</i> | <i>Region X Head Start (Federal)</i> |
|---|--|--|
| <i>Monitoring of compliance with performance standards</i> | <p>Contractor program information, child and family demographic data, and child outcomes reported annually to help contractor self-correct on program weaknesses and help program specialists focus general technical assistance to programs. Program activities and enrollment reported monthly.</p> <p>Monthly electronic reports.</p> <p>Contractors develop action plans, in collaboration with DEL staff, for out-of-compliance standards. This can occur as the result of program reviews, desktop monitoring, or contractor self-assessment. DEL will continue to monitor the program until compliance with the performance standards are met. Depending on the issue, DEL ECEAP specialists can conduct monthly follow-up by phone, on-site follow-up or technical assistance. Timelines for correction are individualized for the issue and the contractor.</p> <p>If contractor fails to show improvement, funding may be revoked.</p> | <p>Grantees complete an annual program information report. Regional Head Start office administers risk assessment oversight system. The program information report is used to roll up data nationally, regionally and by state to look at: demographics of populations served, teacher qualifications, transportation, the percent of special needs population and the developmental issues with children (such as autism, asthma, and obesity).</p> <p>An improvement plan is developed for out-of-compliance standards. A follow-up review may be scheduled. Deficient grantees have strict timelines to comply or funding may be revoked.</p> |
| <i>Program review</i> | <p>Intensive on-site review conducted every four years on performance standards.</p> <p>Review teams: DEL staff with expertise in early childhood education, program management, family support and health.</p> | <p>On-site review every three years.</p> <p>Review teams: federal staff, consultants and peers, with expertise in program design and management, fiscal, education, disabilities, health/nutrition/safety, family support/mental health/community partnerships. Additional person serves as a report coordinator.</p> |

CONCLUSION

DEL has laid the initial foundation for this study through engagement of stakeholders, development of a request for proposal, and the preliminary identification of comparative comprehensive preschool performance standards. Due to historic funding increases, access to DEL's ECEAP is greater than ever before in Washington. At the same time, DEL has raised the quality standards for the program and, for the first time, in 2008-2009 all ECEAP contractors are gathering the same social-emotional data using a research-validated process that includes obtaining information from both parents and educators.

DEL has suspended work on this study due to state budget conditions and DEL's lack of internal capacity to fulfill all the intensive and detailed requirements under statute, but will have increased data to share with the Legislature on the program's child-level outcomes following the present school year.

It is important to note that one requirement in RCW 43.215.125—that DEL "provide comparative data regarding child performance, readiness, and educational outcomes for Washington's existing head start and early childhood education and assistance programs"—may be challenging. There is currently not alignment between the federal Head Start program and state-funded ECEAP program's data-gathering methods.

Child care consultation



The 2007 Legislature provided \$500,000 for the Department of Early Learning (DEL) to pilot a “child care consultation program” that links child care providers with research-based resources to help them care for infants and young children with challenging behaviors.

This section of the report is an interim summary of the three pilot projects that have been implemented, some preliminary evaluation of the first phase of the pilot, and qualitative and quantitative data supporting the effectiveness of behavioral health consultation for child care settings. An evaluation report on “child care consultation” was required under the budget proviso.

The intent of the DEL pilot program is to design, implement and test behavioral health consultation models that support parents and paid caregivers to work *as a team* to support healthy social and emotional development in children in child care. DEL recognizes that the relationships children form in their earliest years have significant impact on the way they function in later years. Research has shown that children who have healthy, nurturing, supportive relationships with those who care for them are positioned for greater success in life. In addition, child care providers who feel supported and well-equipped to deal with behavioral challenges are more likely to stay in the profession and continue working with families of children with behavioral issues.

To date a total of 1,996 children, 814 parents, and 319 child care staff in three Washington geographic catchment areas have benefited from pilot program funding. Direct quotes and key post-consultation data derived from individuals who have been involved in the pilot are interspersed throughout this section of the report to paint a picture of the value behind the data.

| | Children | Parents | Child Care Staff |
|---|----------|---------|------------------|
| <i>Child Care Action Council (Olympia)</i> | 807 | 650 | 61 |
| <i>Catholic Child & Family Services (Yakima)</i> | 319 | 52 | 158 |
| <i>Public Health Seattle & King County</i> | 870 | 112 | 100 |
| <i>Total Served</i> | 1,996 | 814 | 319 |

CHILD CARE CONSULTATION PILOT: PARTICIPANT FEEDBACK

DEL believes there are promising pilot program results to share at this halfway point; these provider participant quotes reflect the overall positive impact of the child care consultation pilot program:

- “The changes around here in just the five weeks of coaching were amazing.”
- “My ‘problem child’ is now just one of the gang.”
- “Watching the videos really helped me see myself and change the way that I interact with the children. My classroom is calmer now.”
- “My attitude has changed—I need to make changes for the child’s benefit. In the environment, my words, my attitude.”
- “We have also seen a reduction in the frequency and severity of behavioral issues in our classroom. The children have responded to the new approach, and we are seeing a steady improvement in their extreme behaviors.”
- “Thanks million! You are truly amazing and I hope your department realizes how helpful you are!”
- “It was great to meet the other parents!”
- “Gave me extra ideas to use with my children.”

BACKGROUND

A 2005 nationwide survey of 4,000 preschool classrooms revealed that young children were being expelled from pre-kindergarten programs at a rate that was three times higher than that of expulsion in the K-12 system. The pre-kindergarten expulsion rate was 6.7 per 1,000 pre-kindergarteners enrolled, where the national expulsion rate for K-12 students is 2.1 per 1,000 enrolled. The pre-kindergarten expulsion rate for Washington students is 7-10 per 1,000 enrolled.¹

An important finding from the Gilliam study was that the likelihood of expulsion decreased significantly when classrooms had access to consultation from mental health professionals. The study recommended that states offer ongoing training to support appropriate, positive approaches to children’s behavioral problems.

Early childhood behavioral health consultation has been shown to have positive effects on children and staff alike including:

- Reducing expulsion rates¹
- Decreasing child problem behaviors (aggression, severe temper tantrums, extreme withdrawal)²
- Increasing pro-social behaviors (positive social interaction, emotional regulation)^{2,3}
- Increasing teacher competencies (feelings of self-efficacy, positive interactions with children, feelings of responsibility and control of their work, better skills in observation, reflection, and planning)⁴
- Improvement in programs (lower staff turnover rates, increased communication and teamwork)⁴

SELECTING THE PILOT AREAS

DEL released a request for proposals (RFP) in November 2007, soliciting proposals from bidders interested in participating in developing and testing approaches to child care consultation that optimize young children’s social-emotional development. After this competitive bidding process, DEL chose three agencies to pilot consultation models, one in each of DEL’s service areas (geographic regions).

- Catholic Family & Child Services—Yakima County (DEL Eastern Service Area)
- Child Care Action Council—Thurston County (DEL Southwest Service Area)
- Child Care Health Program—King County (DEL Northwest Service Area)

The proposals were scored based on several factors, including: experience providing consultation to child care providers; experience in working collaboratively with community-based health and human services; in-depth knowledge of early childhood development; and cultural competency. DEL awarded each pilot agency \$141,600 for a two-year period to develop and provide consultation and related services in early learning settings.

DEL included in its five-year strategic plan a goal of evaluating all of its investments to ensure public dollars are spent wisely. For this project, the department executed an intergovernmental agreement with the University of Washington Department of Psychiatry & Behavioral Sciences to conduct an evaluation of the agencies’ efforts.

PILOT PROGRAMS AND RESULTS

Each of the three pilot agencies has completed one year of service provision, testing consultation models that they proposed as the best approaches to meet the needs and capacities of the communities targeted. DEL also was interested in learning which model could offer the greatest “reach” to both families *and* providers, as DEL considers parents as children’s first and most important teachers. A consistent team from out-of-home care to at-home support is critical to children’s development.

Child Care Action Council, Olympia

The Child Care Action Council (CCAC) developed a mental health consultation model called Supporting Successful Relationships (SSR). This is a training program adapted from the Promoting First Relationships (PFR) program developed at the University of Washington School of Nursing’s Center on Infant Mental Health and Development. SSR is an attachment-based, prevention-focused program dedicated to training child care providers to meet the social-emotional needs of very young children in both center and family home settings.

The goals of this consultation program are to promote mutually enjoyable relationships between providers and children, increase providers’ feelings of competence and confidence

in their child care roles, and to help providers support children's social-emotional development. The key components of this consultation model are:

- The SSR training program
- Provider workshops and trainings
- Community Café

The main component of this consultation model is the SSR training program, which uses materials from the PFR curriculum, including training videotapes, a written manual, and a set of illustrated handouts (available in English and Spanish). The curriculum focuses on seven components:

- Theories of attachment and identity formation
- Use of specific consultation strategies
- Social-emotional needs of children ages birth to 6
- Caregiving qualities that support infant attachment and emotional regulation
- Caregiving qualities and activities that promote healthy development of toddler identity, motivation and social competence
- Intervening with challenging behaviors
- Caregiver's own sense of self, emotional regulation, and supports that influence the care giving environment

The SSR model is a series of five hour-long direct consultation sessions using a variety of consultation activities. CCAC's consultation model uses three part-time consultants who are certified Promoting First Relationship consultants. The consultants each have different training, credentials, and experience, but each consultant has a strong background in child development, experience working in group child care environments, and experience training adults.

The consultant provides the following activities: Establishing an emotional connection between consultant and caregiver, caregiver interview, videotape of caregiver-child interactions, joint review of videotapes that includes reflective observation, verbal feedback, and reflective questioning, and use of handouts to explain children's social-emotional needs and the importance of relationships.

While the SSR consultation activities are the main component of this model, consultants also provide other services for child care programs. Providers in a five-county area have access to trainings that focus on various topics related to meeting the social and emotional needs of children:

- Children's Emotional Resiliency
- Positive Guidance
- Time In vs. Time Out
- Dealing with Feelings
- Mentoring Families Out of Poverty
- Guiding the Behavior of Young Children

The final component of this consultation model is the Community Cafés, which are held quarterly at local child care centers. The Community Café model is based on the principles of the Strengthening Families framework. Strengthening Families is an initiative that recognizes the important role that child care providers play in helping families of young children build protective factors that will allow them to parent effectively, even during times of stress. To enhance protective factors, child care providers focus on strengthening the following factors of family life: parental resilience, social connections, knowledge of parenting and child development, support in times of need, and social-emotional competence of children.

The Community Café is a method of facilitating conversations among parents about the things that keep their families strong. During the Community Cafes, parents gather in small groups at tables covered with sheets of paper and markers. Each table has a discussion question. Guided by a facilitator, parents explore the questions at each table by talking, listening and reflecting with one another.

The target population for this consultation program model is licensed child care providers in Mason, Lewis, and Thurston counties, for both center-based programs and family home providers. Many participating providers are self-referrals, who are faced with challenging behavior from a specific child or who want to emphasize a relationship-based focus in their practice. DEL child care licensors also refer providers when the licensors desire additional technical assistance for center and family home providers around provider-child interactions.

CCAC has been collecting quantitative data on the number of children, parents, and providers served. To date, the program has trained a total of 61 child care providers at 23 different centers and family home providers. Because the program focuses directly on the interactions between two individuals—the trained provider and an individual child—a total of 62 children have directly been served. However, because the focus of mental health consultation is on building a provider’s capacity to meet the social-emotional needs of *all* children in the program (including but not limited to the focus children in the dyads), the number of children affected through interactions with trained providers could potentially be much higher, at more than 800 children, which represents the total number of children enrolled in all participating programs.

Similarly, the programs track the number of parents served through this program by counting a single parent for each child that has been in a center that completed the SSR program. Using these criteria, SSR reports that 650 parents have been served thus far.

Additionally, consultants administer pre and post-consultation surveys with each provider who participates in the SSR training program (attached as Appendix C-1 of this report). The training evaluations measure provider ratings of their own abilities related to meeting children’s social-emotional needs, as well as elicit information on the skills they feel they’ve learned as a result of the consultation model .

According to the survey results received thus far:

- 100 percent of SSR graduates agree they can more easily identify the unmet social and emotional needs of children
- 100 percent agree they've learned strategies to promote social-emotional development
- 100 percent agree they understand relationship-building strategies
- 100 percent agree they're more confident working with children with challenging behaviors
- 100 percent agree they've gained insights into their own strengths and their relationships with children

Providers have commonly attributed the acquisition of the following new skills to the SSR training model:

- Recognize and acknowledge children's emotions
- Evaluate and identify the underlying cause of problem behaviors
- Implement strategies to deal with challenging behaviors and meet children's needs
- Communicate effectively with parents
- Develop positive, responsive relationships with children

Providers who have participated in the SSR training have expressed their appreciation for the availability of such a program. The following comments are a sample from providers:

- "I now have the ability to recognize specific problems with children, based on their behaviors. I can react or intervene properly."
- "I believe everyone in child care should know about and take part in this program."

Catholic Family & Child Services, Yakima

Like the CCAC model, the Catholic Family & Child Services (CFCS) child care consultation model is focused on providing comprehensive services and support to child care providers and parents to optimize young children's social-emotional development. Consultation services are provided for children who present with a range of challenging behaviors or emotional concerns, with an emphasis on providing services that are focused on prevention of or very early intervention for behavioral challenges.

Five consultants are part of this team. While the consultants have different backgrounds in terms of discipline focus, training, and experience, each has either a bachelor's or master's degree, and each has experience in mental health and early childhood education. The key components of this consultation model are:

- Training, consultation and support for one pilot site
- Community consultations
- Parent Café
- Parent and provider trainings

The CFCS model is working directly with one licensed child care center as the pilot site. The center serves 85 children ages 1 through 12, and has a staff of 20. CFCS has been collecting quantitative data on the number of children, parents, and providers served. To date, the program has trained a total of 158 child care providers through their training and on-site consultation services. Through on-site consultations with providers, the program has served 319 children, which represents the total number of children enrolled in the visited programs. Through the consultations, trainings, and parent-provider meetings, the program has served 52 parents thus far.

CFCS consultants provide intensive behavioral training and support to the center staff, with an emphasis on increasing positive, constructive caregiver-child interactions and giving providers the tools and skills to promote positive child behaviors and deal with challenging behaviors effectively.

One primary consultant is assigned to this center, working with the staff on an ongoing basis and is on-site at least three hours per week. While on site, the consultant participates in a variety of activities, with the key consultation activity being classroom behavioral observations of providers and children. During these observations, the consultant observes for and records specific caregiver behaviors that support children's development (i.e. giving clear directions, providing positive feedback, etc.) and the resulting child behaviors (i.e. compliance, engagement, non-compliance, etc.).

After the observation, the consultant provides feedback and coaching to the caregiver based on the presence of specific behaviors observed. Other consultation activities conducted with the center include child care staff training, planning and debriefing at staff meetings, and assisting staff in developing classroom and behavior plans.

The community consultation portion of the CFCS model serves the needs of other centers in the community (aside from the pilot site). A consultant will conduct an observation of a child care classroom or a particular child within the context of the classroom and then meets with child care providers to identify behavioral concerns, and discuss how to promote positive child behavior, teach children effectively, and strengthen children's social-emotional competencies. Consultants use a variety of evidence-based behavioral and educational strategies to guide their observations and training of the providers. A minimum of one hour of consultation is provided to each center; a total of 18 different centers have received consultation services thus far.

Another component of the CFCS model is the parent networking series, known as the Parent Café. As previously mentioned, the Parent Café is a component of the Strengthening Families framework, and at the one year point in the pilot, 52 parents have participated. The CFCS model uses this activity as an opportunity to strengthen the relationships between parents and providers, making the meetings available to both in order to promote communication. The Parent Café sessions are quarterly meetings for parents, held at one of the local child care centers, and the families choose the topics of discussion for each meeting.

Kids' Potential, Our Purpose

The final component of the CFCS model is the series of monthly State Training and Registry System (STARS) trainings offered to child care providers and parents. Trainings are designed to provide parents and providers with more in-depth information about child development, social-emotional development, attachment, and behavioral interventions, as well as to provide a forum for parents and providers to build networks of support and facilitate friendships. Parents and providers have an opportunity to shape these trainings by requesting topics when CFCS consultants are on site at the centers or by completing a training interest survey at each workshop.

The CFCS program targets licensed child care providers and parents in Yakima County. Referrals to this program come from several sources, including direct contact from providers who have behavioral or social-emotional concerns about particular children in their programs, from parents who have concerns about their children's behavior or development, or from DEL licensors desiring technical assistance for child care centers.

In addition to quantitative data on numbers served, consultants administer pre- and post-consultation evaluations with providers who use the consultation services (Included as Appendix C-2 of this report). The training evaluations measure provider satisfaction with the services and support they received and with their interactions with the consultant. According to the survey results received thus far:

- 93 percent rate themselves as satisfied with the information received
- 93 percent rate their interaction with the consultant as positive
- 92 percent agree that the suggestions they received were helpful in dealing with a specific situation

Project staff also collect data on each on-site consultation with a child care program in the form of behavioral observation notes. The notes contain detailed information on the behaviors of children and providers observed by the consultant. During an initial observation the consultant identifies two to three target skills for the provider to work on throughout his or her daily interactions with children. During each subsequent visit, the consultant observes, records, and provides feedback to child care staff regarding the target skills. These observation notes serve as evidence of the providers' progress towards their targeted goals over time.

For example, on an initial observation at the pilot site child care center on April 7, 2008, the skill of specifically praising appropriate child behavior was identified as a goal for the providers. The following are excerpts from behavioral observation notes regarding this skill:

- April 23: "Praising on-task children and using reinforcements to keep kids on task observed."
- June 18: "Improvements: Began implementing star charts/appropriate use of reinforcement for positive behavior to encourage catching children 'being good' vs. attending to negative behavior."

- August 18: “Staff K. used specific praise often to reinforce positive behaviors. Staff E. praised at times more than on previous visit.”
- September 3: “Teacher instructed to use nurturing vocabulary with praise when instructing children.”
- September 8: “Improvements noted: Praising by staff, especially K., is being done.”
- September 22: “Consultant collected data in the classroom. Staff praised a total of 168 times during the hour observation.”

Caregivers at the pilot site have expressed their appreciation for the services provided through this consultation model. They felt that their skills and capacities to care for children with challenging behaviors had increased. Comments include:

- “Thanks to the training our staff is receiving we believe we will be able to keep even the most challenging children in the future.”
- “The increased skills of our staff will allow us to recognize issues earlier.”

Parents are also being surveyed as a part of the data collection process for the CFCS project. Satisfaction surveys are administered after the Parent Café activities to determine parents’ level of satisfaction with the program. According to the surveys, 93 percent stated that the Parent Café information was useful to their family. Parents commented as to why they felt the information provided was useful:

- “Open communication between staff and parents is always a good thing to facilitate improved care.”
- “Parents were able to express their concerns and joys regarding their children’s changes.”

Public Health – Seattle & King County, Seattle WA

The Child Care Consultation Health Program (CCHP) is a partnership between Public Health Seattle and King County and Encompass, an early childhood and family support center in the Snoqualmie Valley.

The CCHP model places an emphasis on providing training and support to child care providers that will increase their knowledge and skills. The goals are:

- Educate and empower providers to create high-quality environments and form relationships that effectively support social-emotional development and address problem behaviors, rather than relying on the support of an outside expert each time a child presents with a behavioral or emotional concern.
- Assist providers in strengthening partnerships with families and with other providers, in order to create local networks of support for child care providers and families.

A licensed child psychologist who has a background and practical experience in early childhood education and community mental health provides the consultation and training services in this program. A health educator from Public Health Seattle King County and early childhood educators from the Encompass program also provide training and support services for trainings.

The key components of this consultation model are:

- Training for child care providers
- Consultation to child care providers
- Consultation to families

The main focus of the CCHP consultation model is on building strong relationships between the consultant and caregivers, then helping caregivers build their knowledge and skills in the area of child development through a series of trainings. The training and support activities are structured to encourage the participation and motivation of providers, and directly target increasing the providers' well-being, skills, and feelings of competence.

All trainings are held on Saturdays (identified as the most convenient day by providers), have child care available, and have a meal served following the training in order to encourage conversation and networking among providers.

The initial training provided by the CCHP, called "Taking Care of Ourselves," was focused on adult mental health, stress management and relaxation. Other two-hour trainings provided by the model include:

- Creating Environments to Support Emotional Growth in Young Children
- Toddler Behavior Challenges
- Communicating with Families: Communicating, Problem Solving and Supporting

The consultation visits with individual child care programs occur at the request of the provider. Child care providers are encouraged to contact the program if they have specific concerns about a child's behavior or development, or would like additional information or support to use strategies learned at the training in their own programs.

The consultant conducts behavioral observations of children or classroom environments, reflects with providers and assists them in developing strategies to address behavioral or emotional challenges. The consultant also connects providers with community resources, and provides books and additional resources.

The final component of the CCHP consultation model is consultation and support to families. The program consultant offers a regular consultation time to all programs for the purpose of connecting with and providing resources for families. The consultant schedules late afternoon sessions at the child care centers (when families are picking up their children), where she is available for informal discussions with families about their children, parenting, issues of concern, or other family needs.

Through these informal consultations, the CCHP consultant noticed that there was a common pattern of topics on which families were requesting further information and support: toilet training, sibling rivalry and biting behavior. To meet the parents' needs, the consultant

developed a series of resource manuals on these topics, which are now available for parents at the child care centers (included as Appendix C-3 of this report). Additionally, the mental health consultant attended the annual family picnic at the Encompass center. At this event, she set up a booth where she had conversations with parents and distributed children's books with social-emotional development themes.

The target population for the CCHP consultation model is providers in licensed child care centers and family child care homes in the North Bend, Snoqualmie, Fall City and Preston areas of east King County.

Information about the provider trainings and consultation services is made available to providers through a variety of means (newsletters, provider meetings, phone calls, mailings, etc.), and most of the referrals for the child care program consultations come directly from providers who have participated in the trainings and contact the program for further training and support. The CCHP also has a relationship with DEL licensing staff, and also receives recommendations from DEL licensors on programs that might benefit from participating in the program.

CCHP has been collecting quantitative data on the number of children, parents, and providers served. To date, the program has trained a total of 100 child care providers through their consultation and training services. Through the trainings and on-site consultations with providers the program has served 870 children, which represents the total number of children enrolled in all participating programs. Through the on-site conversations with parents and attendance at the family picnic, the consultant has reached 112 parents thus far.

Additionally, trainers administer post-training evaluations to providers who attend the Saturday trainings (Included as Appendix C-4 of this report). The evaluations measure provider ratings of the skills they feel they've learned as a result of the trainings. According to the survey results received thus far:

- 93 percent agree the information provided will help in their day-to-day work with children
- 99 percent agree their knowledge increased as a result of the training

The post-training evaluations also elicit qualitative information on the utility of the program and ways in which their practice has changed. Some comments shared by providers:

- "I have found the tips received in the trainings very relevant to my day-to-day work. I have changed my teaching style because of them."
- "I always take something (or a few things) back to school. I share some of the best ideas with my staff the next day after class."
- "My attitude has changed – I need to make changes for the child's benefit. In the environment, my words, my attitude."

At the most recent training in November, providers in attendance were surveyed on the resources they had available in the area of challenging behaviors prior to the inception of this program and whether they thought there were children for whom they were unable to pro-

vide quality care prior to receiving CCHP services. Of the six providers who completed the survey, five providers stated that there were resources available prior to this program, although there were those who previously had no trainers or resources available to them. Four providers stated that they felt that this model had provided them with resources and skills to better serve children with challenging behaviors.

One provider stated: “Absolutely [there were children who I felt like I could not provide quality care for] and absolutely [this has changed as a result of the project]. To have valuable input to deal with specific behaviors. I used it immediately and saw progress.”

CONCLUSION

The first year of the child care consultation pilot project already has yielded significant results. The three pilot agencies implementing this project differ from one another in their theoretical approaches to promoting social-emotional development, their structures, and their implementations of consultation activities. All the consultation models are filling an unmet need in Washington. And, two of the three models that incorporated the Strengthening Families framework preliminarily seem to be producing greater “teamwork” between parent/families and paid caregivers, rather than a more heavily care provider-centric approach.

However, there is a common set of core behavioral health consultation activities taking place in each model:

| | Consultation Activities |
|--|---|
| Child Care Action Council | <ul style="list-style-type: none"> • Supporting Successful Relationships curriculum coaching (video tape, feedback, reflection, and planning) • Provider training workshops • Parent support (Strengthening Families Community Café) |
| Catholic Child & Family Services | <ul style="list-style-type: none"> • Onsite behavioral observation, feedback, and coaching • Provider and parent training workshops • Parent support (Strengthening Families Parent Café) |
| Public Health – Seattle & King County | <ul style="list-style-type: none"> • Provider training workshops • Onsite observation and feedback • Informal parent consultation |

As part of this evaluation process, mental health consultation research literature was reviewed and summarized to determine best practices in this area (included as Appendix C-5). The activities and approaches being implemented by the pilot sites align nicely with the recommended practices from mental/behavioral health consultation literature:

- Program-focused consultation activities (i.e., provider trainings, classroom observations)
- Child-focused consultation activities (i.e., observations focused on child of concern, development of individual behavior plans)
- Reflective supervision
- Provision of resources

Each pilot site has been collecting some form of both quantitative and qualitative data on the implementation of their consultation models:

| | Measures |
|--|---|
| <i>Child Care Action Council</i> | <ul style="list-style-type: none"> • Number of parents, providers, children served • Post-consultation evaluations |
| <i>Catholic Child & Family Services</i> | <ul style="list-style-type: none"> • Number of parents, providers, children served • Post-consultation evaluations • Behavioral observation data • Parent Café satisfaction surveys |
| <i>Public Health – Seattle & King County</i> | <ul style="list-style-type: none"> • Number of parents, providers, children served • Post-training evaluation • Satisfaction survey |

While the DEL pilot program has outlined goals for this project (decreasing expulsion rates, increasing provider skills and capacities, increase child social-emotional development, prevent problem behavior), no data in year one were collected to measure progress towards these goals so that each agency could focus on building its capacity to deliver services under their chosen consultation model. In order to gather a core set of data to evaluate for the second year of this project, DEL has asked sites to collect data that measure the following items consistently across sites:

- Frequency of expulsion in centers accessing services
- Child performance (change in social skills and/or problem behavior)
- Provider performance (change in skills or knowledge)

At this mid-pilot point, there is evidence to suggest that child care consultation models being tested have the ability to enhance parents' confidence in positively approaching challenging child behaviors, and provide child care staff the skills and resources needed to promote healthy social-emotional development, leading to decreased expulsion from care.

As another building block toward raising the level of quality of child care and ultimately child outcomes, child care consultation appears to hold significant promise for Washington. Through evaluation of the pilot and the 2009 final report, DEL will be able to propose key elements of consultation that need to be present to achieve the best and most cost-effective results.

END NOTES

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3. Green, B., Everhart, M., Gordon, L. & Gettman, M. (2006). Characteristics of effective mental health consultation in early childhood settings: Multilevel analysis of a national survey. *Topics in Early Childhood Special Education, 26*(3), 142-152.
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Appendix

A—Seeds to Success

B—Kindergarten Assessment Processes

C—Child Care Consultation



Appendix A-1: Seeds to Success model



- Facility that is licensed by DEL or a Tribal Nation and cares for young children (not only school-aged children). To be eligible, the facility cannot have a license that is revoked or suspended.
- Agreement to complete research-based Early Learning Standards training.
- Upon entrance, facility meets with each family to learn about culture, language, family structure and goals for child.

CURRICULUM & LEARNING ENVIRONMENT



TWO SEEDS
ONE SEED PLUS:
Overall average score of 3 or more on the Environmental Rating Scale

ENVIRONMENT
Learning activities are centered around play and cultural awareness and involve the use of multiple senses.

DAILY CURRICULUM & ACTIVITIES

Topics and materials are related to children's interests and culture. Opportunities exist for children's interests to guide the learning process. Facility has a written philosophical statement. Each facility or home has a written curriculum statement.



THREE SEEDS
TWO SEEDS PLUS:
Overall average score of 4 or more on the Environmental Rating Scale

Curriculum promotes children's interaction and involvement in the community.



FOUR SEEDS
THREE SEEDS PLUS:
Overall average score of 5 or more on the Environmental Rating Scale

DOCUMENTATION

Observe and document children's progress (e.g., work sampling) and play to assess growth. Daily written communication for children birth to 18 months to encourage conversations about developmental milestones.

Educators integrate learning and developmental progress reports into individual and classroom/curriculum approaches.

Assess individual child's developmental progress at least twice a year, using a coach-approved assessment tool. Conduct informal child observations at least 4 times a year. Documentations of child observations and assessments are on file and shared with parents at least twice a year.

Educators allow children to take risks by testing out some of their own ideas.

INTERACTIONS

Educator observes and listens to each child responding in ways that are respectful, specific and make sense to the individual child.

Educators work from the philosophy that children can be challenged to grow and respond with appropriate guidance according to the individual child.

BEHAVIOR GUIDANCE

Educators model and encourage empathy and compassion in all children.

Educators stay current on research-based best practices related to behavior guidance. Educators understand and apply knowledge of how behavior guidance techniques can be adjusted for children with disabilities.

LANGUAGE & LITERACY

Children are offered varied activities to explore literacy and language such as interactive games, songs and storytelling. Children have access to books and are read to individually and in small groups.

Facility connects children's verbal communication with written language by encouraging them to narrate stories through scribbles, pictures, letters, words and drawings.

**** FIVE SEEDS**
FOUR SEEDS PLUS:
RATIO REQUIREMENTS
(*FIVE SEEDS ONLY*)

- Family Child Care:**
If more than 4 children under 36 months, educator must have an assistant. If more than 8 children total, educator must have an assistant.
- Centers:**
Infant — 1 staff; 3 children
Toddler — 1 staff; 5 children
Preschool — 1 staff; 9 children
- ** Five Seeds exists only for Curriculum & Learning Environment

Appendix A-1: Seeds to Success model (cont'd)



- Facility that is licensed by DEL or a Tribal Nation and cares for young children (not only school-aged children). To be eligible, the facility cannot have a license that is revoked or suspended.
- Agreement to complete research-based Early Learning Standards training.
- Upon entrance, facility meets with each family to learn about culture, language, family structure and goals for child.



PROFESSIONAL DEVELOPMENT & TRAINING



ONE SEED PLUS:

Family Home Provider
Training identified in FIP* completed
Family Home Assistant
Completes First Aid/CPR/BBP, 20 hours basic STAES and ongoing 10 STAES hours
Center Director
Training identified in FIP completed
Center Lead Educator
Training identified in FIP completed
Center Assistant Educator
18 years of age
Training identified in FIP completed
Basic CPR/First Aid/HIV training
100% have completed 20 STAES hours



TWO SEEDS PLUS:

Family Home Provider
Training identified in FIP* completed
Family Home Assistant
Training identified in FIP completed
Center Director
Training identified in FIP completed
Center Lead Educator
Training identified in FIP completed
Center Assistant Educator
Training identified in FIP completed



THREE SEEDS PLUS:

Family Home Provider
Training identified in FIP* completed
Family Home Assistant
Training identified in FIP completed
Center Director
Training identified in FIP completed
Center Lead Educator
Training identified in FIP completed
Center Assistant Educator
Training identified in FIP completed

TRAINING

EDUCATION

Family Home Provider
Enrolled in CDA program/ECE credits to meet CDA requirement, or Associates level degree program
Center Director
Associates level degree in related field, or 60 college credits
Center Lead Educator
25% have Associates level degree in related field, or 25% have CDA or 15 ECE credits
Center Assistant Educator
50% have high school diploma/GED

Family Home Provider
CDA or enrolled in Associates level degree program with at least 3 credits earned in last 6 months
Center Director
Associates level degree in related field and enrolled in BA in ECE/related field or meets the alternative pathway to NAEYC/NAA Director qualifications
Center Lead Educator
50% have CDA or 30 credits in ECE/related field, or 50% have Associates level degree in related field
Center Assistant Educator
50% enrolled in a CDA/Associates level degree program with at least 3 credits earned in last 6 months

Family Home Provider
Associates level degree or BA in ECE/related field
Center Director
BA in ECE/related field or meets the alternative pathway to NAEYC/NAA Director qualifications
Center Lead Educator
100% have Associates level degree in related field, or 50% have BA
Center Assistant Educator
50% have CDA or 15 credits in ECE/related field, the other 50% working towards it

EXPERIENCE

Family Home Provider
At least 1 year of verifiable experience
Center Director
1 year verifiable supervisory experience
Center Lead Educator
6 months of verifiable experience
Center Assistant Educator
No additional requirement

Family Home Provider
At least 2 years of verifiable experience
Center Director
1 year verifiable supervisory experience
Center Lead Educator
6 months of verifiable experience
Center Assistant Educator
3 months of verifiable experience

Family Home Provider
At least 5 years of verifiable experience
Center Director
6 months verifiable supervisory experience
Center Lead Educator
1 year of verifiable experience
Center Assistant Educator
6 months of verifiable experience

* FIP—facility improvement plan

Appendix A-1: Seeds to Success model (cont'd)



- Facility that is licensed by DEL or a Tribal Nation and cares for young children (not only school-aged children). To be eligible, the facility cannot have a license that is revoked or suspended.
- Parent involvement/ review in self-assessment.
- Upon entrance, facility meets with each family to learn about culture, languages, family structure and goals for child.



FAMILY RELATIONSHIPS & COMMUNITY PARTNERSHIPS



ONE SEED PLUS:

Formal parent orientation process, which includes explanation of classroom curriculum/approaches and shares established method of ongoing communications with families.

PARENT RELATIONSHIPS

PARENT INVOLVEMENT

Facilities develop method to gather parent values and perspectives, including relevant cultural elements, as well as what parents want for their individual children.

Facility incorporates parent/family input into curriculum and activities. Facility actively welcomes families to visit and/or participate in classroom activities or field trips.

CONNECTING TO RESOURCES

Facility has key relationships with local community resources such as early intervention and provides referrals to families as needed.

USE OF DATA TO INFORM FACILITY

Facility administers annual family satisfaction survey and shares results with families.

Family satisfaction survey results are shared and applied toward quality improvement.

SCHOOL CONNECTIONS

Facility provides families with information and resources on local kindergartens including brochures, registration dates and open houses sponsored by local schools.

Pre-K educators attend local kindergarten information meetings to stay informed and communicate information to parents and families. Parents are encouraged to share information regarding child's special needs/circumstances including an Individualized Education Program if applicable.



TWO SEEDS PLUS:

Community of parents gather at least once per year. Individual parent meetings are offered at least once per year in their native language (or using qualified interpreters).

THREE SEEDS

THREE SEEDS PLUS:

Parent training or information meetings on child development topic or kindergarten readiness offered at least twice per year. Individual parent meetings are offered at least twice per year in their native language (or using qualified interpreter).

Facility incorporates parent/family input into individual child goals. Facility has documented overall Family Engagement Plan.

Facility provides opportunities for local community resource organizations to share information on-site.

Facility incorporates opportunities for written parent feedback during individual parent meetings.

Facility has written kindergarten transition plan available to families. Facility sponsors kindergarten transition meeting for families with parent alumni in attendance if possible. If applicable and with parent consent, facility is involved in Individualized Education Program goal setting meetings with school staff.

Appendix A-1: Seeds to Success model (cont'd)



- Facility that is licensed by DEL or a Tribal Nation and cares for young children (not only school-aged children). To be eligible, the facility cannot have a license that is revoked or suspended.



MANAGEMENT PRACTICES



ONE SEED PLUS:

BUSINESS PLAN
Facility has business plan in place, including a one-year operating budget.

STAFF PLANNING TIME

Lead teaching staff have at least two paid hours of planning time each month.
For facilities with only one staff member, sufficient time is set aside for planning.

BUSINESS PRACTICE

Accounting system in place.
Administrators have training in accounting and relevant business topics such as employment law and liability insurance.

EMPLOYEE REVIEW
(If facility employs more than one staff member)

Facility offers annual performance reviews for all employees that include observations and demonstration of practice.

STAFF COMPENSATION
(If facility employs more than one staff member)

Facility uses a wage scale that reflects staff qualifications and length of experience.
Reward system in place for increased training, education and experience.



TWO SEEDS PLUS:

BUSINESS PLAN
Business plan includes strategies to minimize the number of staffing transitions experienced by children.
Facility staff is involved in development of business plan and operational goals.
For facilities with only one staff member, a consistent substitute is available.

Lead teaching staff have at least one paid hour of planning time each week.
For facilities with only one staff member, sufficient time is set aside for planning.
If facility employs more than one staff member, staff meetings are held at least 6 times per year.

Administrators complete annual training specific to business practice and fiscal responsibility.

Annual reviews include self-review opportunity for each staff member.

Wage scale comparable to similarly qualified early learning positions in the region.



THREE SEEDS PLUS:

BUSINESS PLAN
Business plan and operational goals are shared and reviewed by families. Do not need to include financial information if private and for-profit.

All teaching staff have at least one paid hour of planning time each week.
For facilities with only one staff member, sufficient time is set aside for planning.
If facility employs more than one staff member, monthly staff meetings are held.

Administrators can demonstrate use of annual training to improve and maintain business practice and fiscal responsibility.

Annual performance review includes opportunity for co-workers and families served to provide feedback on employee performance.

All staff offered paid release time to attend professional development opportunities.
All staff members are eligible for medical and other benefits including paid time off and sick leave.

Appendix A-2: Text of May 28, 2008 letter following QRIS meeting

May 28, 2008

Dear QRIS Design Communities, Thrive by Five Washington, staff, and Early Learning Advisory Council Members,

Thank you for your participation, your willingness to learn with us, and your wonderful enthusiasm on May 23rd. The Department of Early Learning (DEL) is looking forward to moving ahead with you as we approach the new fiscal year of resources aimed at raising the quality of care and education for our children through a voluntary quality rating and improvement system (QRIS).

There were so many important discussions, questions and ideas raised on Friday. As I said at the end of the day, some of us are comfortable with “white space” or ambiguity and organic design, others of us are less comfortable – I was so pleased with where we ended the day despite our differing personal styles!

A few major “ah ha’s” or recurring themes from the small groups that I heard from the report outs on Friday:

- **One Washington model**

- We must all come together around one model to be successful.
- We’re not there yet – but we’re a whole lot closer!

We agree on more than we don’t – providing the promise that we can coalesce to the benefit of our children.

- **Words matter**

- The nomenclature that we use is critical.
- How we talk about the QRIS model and its components, especially the “field testing” versus “pilot implementation” and “research-based early childhood guidelines” – how we use our “words” – *matter* so that we lead this initiative to success.

Reconciliation of some past flawed processes without closure needs to occur in the coming year.

- **Current resources:**

Resources are not enough to do everything we all want to do. National best practices in this burgeoning work organized as “quality rating systems” all have some form of a tiered reimbursement component. Given that it is not possible to adequately fund tiered reimbursement in the QRIS model during the field testing year, the DEL will look at what would be needed for a larger state pilot implementation of a Washington QRIS.

What we understand from Thrive by Five President Graciela Thomas, is that while we will all be working under one model, the two Thrive by Five/Gates demonstration communities will likely have access to higher levels of financial incentives during the field test year (called “high intensity” during our May 23rd meeting) and all cohort/design communities will be provided QRIS incentives that are very significant during field testing (some with “lower intensity”). This will allow Washington State to look at the differences between levels of incentives and will give us *great* information to consider for future implementation.

Many of us are excited about the incentives, attraction and supports offered through the proposed “low intensity” and “high intensity” approaches even though we may not have all the details yet.

Appendix A-2: Text of May 28, 2008 letter following QRIS meeting (cont'd)

- **Inclusion of the school age population:**

The field test year will provide us the opportunity to look at how the system operates at a baseline level, understanding that we will learn and build in future incentives and/or elements. For instance, school age program participation is critical, and we must look at transformation of the regulations (Washington Administrative Code) simultaneously. Building the QRIS model in incremental steps will allow us to ensure that we have the necessary regulations *and* resources in place for future additions to the model.

- **A lot more to learn!**

- We have so much more mutual learning to do! Certainly, I learned a lot from the questions and comments on Friday – all the verbatim language from the white boards and charts are included with this letter. Our agreements on “what we know” at the end of the day were:
 - **We all want it to work.**
 - **It’s a dynamic process that will change along the way.**
 - **We have to jump right in!**

I loved having the Peggy Ball quotes around the room when we met. One of my favorite pieces of advice from Peggy, one of the great leaders on quality improvement systems in early childhood care and education: “...this is not about the perfect QRIS. It is a system that fits our resources and ability to implement. We can improve it as we go along.”

I have confidence that working together, we can make significant steps toward a process that will likely take many years of hard work to get where we all “dream” of getting for our children and families in Washington. As Peggy also commented and we agreed on Friday, we have to “jump right in” and “do it now!” -- every delay means more children starting school not ready, more parents going unsupported, more caregivers and teachers dedicatedly striving without needed resources and tools.

Again, thank you for your community efforts and great minds on behalf of Washington’s children and families. Dr. Juliet Torres, the DEL QRIS Coordinator, will be following up with you but I wanted to thank you and get your work back out to you right away. I look forward to hearing about next steps you develop together!

Very best regards,



Jone M. Bosworth
Director

Appendix A-3: List of Seeds to Success town hall dates and locations

Spokane County

7 to 8:30 p.m.

October 15

WSU Riverpoint Campus

Health Sciences Building, Room 110B

7 to 8:30 p.m.

October 21

Spokane Falls Community College

Student Union Building (Building 17),
Lounge C

Clark County

7 to 8:30 p.m.

October 16

Educational Service District 112

2500 NE 65th Ave., Vancouver

7 to 8:30 p.m.

October 20

Educational Service District 112

2500 NE 65th Ave., Vancouver

Kitsap County

5:30 to 8:30 p.m.

October 7

Olympic Educational Service District

105 National Avenue N., Bremerton

8 a.m. to 2 p.m.

October 18

Olympic Educational Service District

105 National Avenue N., Bremerton

White Center

7 to 8:30 p.m.

October 28

White Center Library

11220 16th S.W.

(This session conducted in Somali)

7 to 8:30 p.m.

October 30

White Center Library

11220 16th S.W.

10 to 11:30 a.m.

November 1

SW Boys and Girls Club

9800 Eighth Ave., S.W., White Center

East Yakima

6 to 8:30 p.m.

October 27 and 28

Educational Service District 105 - Yakima

Room

33 South Second Ave., Yakima

Appendix A-4: Review of Washington QRIS model

June 29, 2008

Dr. Amie Lapp Payne
Department of Early Learning
PO Box 40970
Olympia, WA 98504-0970

Dear Amie:

Thank you for the opportunity to review the draft plan for a quality rating and improvement system for early care and education in Washington and to give you my observations and recommendations. All of the documents you sent me reflect an inordinate amount of work and planning among your agency and other partners. I commend you on the excellent work and planning that is underway.

As you know, my perspective on quality rating systems comes both from my administrative experiences within our state's licensing agency as well as my direct experience in running early childhood programs. In addition I spent almost 15 years working as the president and CEO of Smart Start in North Carolina, working to improve the quality of all early childhood programs in our state.

Please recognize that my comments are those of an outsider. There are clearly things that I don't know and understand about Washington's early childhood system. I am offering my best thinking about the model that you asked me to review, based on my own experiences and understandings.

I wish you the very best as you proceed to make decisions about this system. I am thrilled that you and other early childhood leaders are coming together around this work. And I am particularly happy to learn that you are working together to create one system for the state.

Thank you again for allowing me to react to your work. Please let me know if I can be of further assistance to you.

Sincerely,

Karen W. Ponder

Appendix A-4: Review of Washington QRIS model (cont'd)

Review of Washington's Draft Quality Rating and Improvement System (QRIS)
Karen W. Ponder
June 29, 2008

General Comments:

I was asked by the Department of Early Learning (DEL) to review the proposed quality rating and improvement system and to make observations and recommendations concerning the proposed model. In preparation, I also reviewed the Thrive by Five models, the enhanced model for QRIS that integrates the DEL and Thrive by Five models, minutes of meetings, frequently asked questions, newsletters and a flow chart.

For the purposes of this document I am using the term “providers” to include lead teachers, assistant teachers, directors, etc. If there is an area of the document that I do not specifically address, it means that I had no questions or suggestions about it.

It is clear that an amazing amount of thought and hard work have gone into the creation of a quality improvement and rating system in Washington. I am very impressed with both the depth and breadth of thinking about this important approach to improving the care and education of young children. And I applaud all the individuals from DEL, as well as other partners, for the dedication to this challenging and important task.

Congratulations to all of you for engaging local communities in thinking about and planning for the state's QRIS system. The people who will be most impacted by this system can provide very important ideas and feedback and it appears that you are engaging in a process that will include their ongoing input. While this takes time and effort, it will serve the communities and the state well.

The first suggestion I make to everyone concerned with QRIS systems is to make certain you are clear about the outcomes of the system. Is your goal to have the majority of programs participating in a process that “lifts all boats” or is it to set very high standards and perhaps have a fewer number of programs reach the highest levels of quality? This decision was one we really struggled and debated in NC and eventually came to the conclusion that at the starting point, we wanted to

Appendix A-4: Review of Washington QRIS model (cont'd)

maximize participation, especially of programs who served our most at risk children. While our standards were not as high on the upper end as many of us wanted, our results have proved that for our state, this was the right approach. And over time we are continuing to raise the standards as programs improve their quality.

A second suggestion I always make is to determine exactly how you will administer the system at the same time as you're creating the elements and standards. I know you have been thinking a lot about this and it is important to do it now, before it is launched. The more challenging standards are to measure, the more complicated your monitoring and assessment systems become and the more expensive the system is to implement. Determine if there are elements of the system that can be reviewed or the data collected by individuals who are already visiting the programs for licensure. This will reduce the time needed by outside assessors who will measure other standards and elements.

Your standards are clearly research-based and incorporate both environmental and behavioral components that will lead to higher quality programs. From an administrative perspective, it is an ambitious approach and will require a great deal of thought and planning to put in place the system to implement and measure the success of programs in meeting the standards.

Another important consideration is to determine if every component in your system is understandable to providers. Will they know what they have to do to demonstrate each standard? For example, "children are read to daily for at least 20 minutes" is concrete and clearly understood. However, "Educator observes and listens to each child, responding in ways that are respectful, specific and make sense to the individual child," may not be as easily understood and demonstrated.

Specific Comments:

Flow Chart

- The flow chart presents a complete analysis of the process of registering and moving through the improvement and rating cycle and is well presented and

Appendix A-4: Review of Washington QRIS model (cont'd)

easily understandable. The Enhanced QRIS Flow Chart is more streamlined, which might be helpful to providers and coaches. The coaching model in both versions is excellent and will be a very important element of this quality improvement system.

- Are incentives tied to anything specific? For example, do the incentives relate to specific improvements in the classroom? I'm not certain if the incentives are received after completion of certain elements or if they are given at the beginning of the process. I suggest the former approach unless they are specifically tied to specific improvements that can be observed and documented.
- Will the coaches work for DEL or will they be technical assistance providers and coaches who work for other organizations? I suggest that you determine the qualifications for these positions and train them specifically for this work prior to launching the system. Regardless of the instruments used, all training needs to be carefully designed and consistently administered to assure quality control of the system and fairness to providers. Done well, this will be a critical part of building and maintaining the good will of the provider community.

DEL's Proposed Voluntary Quality Rating and Improvement System Standards

- I like the visual of building blocks to represent different levels of quality because of their connection to young children and appropriate learning activities. However I wonder if that visual will translate for parents into recognizing and demanding higher quality. Most states have chosen stars because the public understands and relates to achieving higher stars since they are a traditional symbol of quality in other industries. Using a less familiar icon will require a very intensive education campaign for families.
- In your block system model, I assume that each of the elements has to be fully met before you achieve that level. Will there be any flexibility built in for special circumstances? This is often most needed in areas like education and

Appendix A-4: Review of Washington QRIS model (cont'd)

experience. Having a pilot phase will allow you time and opportunities to consider these carefully.

- Your system has elements of a typical rating system as well as an accreditation system, which I believe is what you intended. Consider ways to simplify the basic document where it is possible without weakening the intended outcomes. You will see a couple of specific suggestions later on. It is my experience that having an easily understandable approach is an effective strategy both for providers and for management.
- The dimensions (environment, documentation, education, etc.) are excellent dimensions to support, assess and reward. If I were the administrator of this QRIS process, I would be concerned about how to best assess all of these dimensions in a manner that is timely, accurate, fair and cost-effective. I applaud your recognition of dimensions like “interactions,” and suggest that you think carefully about the kind of instrument you will use to assess these aspects and how you will assure the reliability of the individuals who rate these more subjective dimensions. Having procedures in place that insure rater reliability in an on-going manner is extremely important.
- I assume that none of the items in your model is already addressed in licensing since licensing is a requirement to proceed to blocks 3, 4 and 5. It is important that you not check again for things that are reviewed by the state licensors.

Block One

- There is value to opening registration to all early care and education programs in the state as a way to recognize the diversity of options available for families and to encourage their moving to higher quality. I suggest that you add language about “legally operating” so that there is no question later about the State’s “condoning” illegal programs. What is the incentive to register for unlicensed providers and what do they get as a result? That was not clear.

Appendix A-4: Review of Washington QRIS model (cont'd)

Block Two

- It is my understanding that to attain Block Two, you have to meet licensing/certifications and agree to complete two series of training. Do you move to that block after completing the training? If not, how do you build in accountability?

Blocks Three, Four and Five

From an assessor's point of view, some of these dimensions may be challenging to measure. I suggest using a validated instrument to accurately assess these dimensions, especially if the ratings will eventually affect different levels of funding to the programs.

Environment, Daily Curriculum & Activities, Interactions, Behavior Guidance-

Is there a way to include and measure these elements via an instrument or rating scale? If these are in addition to those included in a rating scale, it will be more complicated for the assessors and require more time and additional administrative costs.

Training-

I understand that the training requirements include the development of an individualized training plan based on each individual's needs. This is a great approach! Continue to think about ways to make training link to degree-bearing credits. Given the challenges of getting providers back to school, try to make as much training/education count toward achieving degrees or certification.

Education-

Does WA currently have the capacity to achieve these levels of education if a large number of providers pursue them? These are goals that you clearly want to achieve, and are they realistic for the current capacity of your community college and university system? Will the appropriate opportunities be available in every community in WA? While demand can drive the creation of early childhood programs in colleges and universities, it does take time to develop them and can be very frustrating to providers and a barrier to their progress if opportunities are not available.

Appendix A-4: Review of Washington QRIS model (cont'd)

Experience-

These are reasonable and appropriate levels of experience. I would suggest including the word “verifiable” before experience in all blocks.

Parent Relationships-

Consider combining Parent Relationships and Parent Involvement as a way to simplify and reduce the number of elements.

Connecting to Resources-

In block 5, I’m wondering how the programs will demonstrate this element. It seems at this block level that you want to know how families have learned about and been connected to these resources as opposed to the program having knowledge about the resources.

Use of Data to Inform Program-

While I understand the value of this element, I want to raise the question if it might be ambitious for some very small programs in your state, including family child care homes. I assume the coach will provide the tools and TA to assist them but wonder if they all have access to computers, etc.

Staff Planning Time-

Consider whether or not this would be demonstrated if many of the other components are achieved. While I recognize the importance of planning time, for this purpose I wouldn’t be as concerned with whether the program had an hour of planning time as I would with the organization of the classroom and what is actually happening there that demonstrate planning has taken place.

Staff Compensation-

This is an important element of a high quality program that you want to support. I suggest that you think carefully about this dimension being part of a rating scale without more on-going supports to allow programs to achieve higher staff compensation such as differential rates. If early childhood programs were adequately funded, I wouldn’t question this element.

Final Recommendations

Appendix A-4: Review of Washington QRIS model (cont'd)

- Consider the possibility of adding differential rates to your model as soon as you are able. I understand that this proposal is for a pilot phase and you may change the funding in the future. Early childhood programs need on-going funding in order to maintain quality. One-time bonuses usually act as incentives for providers to get involved but without on-going supports, quality often cannot be attained and maintained.
- Review the model carefully and simplify the standards where possible. Think about each element from the provider's perspective. Will they fully understand how to accomplish and demonstrate each one? Are there so many elements that it appears to be overwhelming?
- Consider what it will cost to measure the various aspects of the system. A well thought out plan should be developed for monitoring and assessment of the standards that projects the on-going costs for both administration and monetary incentives.
- Continue to work with your community colleges and universities to create a seamless early childhood education system that is friendly to providers who are often going back to school as adults. Work with these educational institutions to develop educational opportunities that are convenient to local communities at places and times that work best for the providers.
- In my brief review of the enhanced model, which I understand is the joint work of DEL and Thrive to bring 2 different approaches together, my observation is that you're making real progress in moving to one system. I applaud these efforts and believe that a unified approach will be best for your communities, providers and both agencies to get the best long-term results for the children in WA.

Appendix B-1: Washington State Kindergarten Assessment Processes—Online Survey Summary

To inform the development of recommendations for a statewide kindergarten assessment process in Washington State, SRI International surveyed districts and schools about current kindergarten assessment processes in Washington. This document summarizes data from the online survey of districts and schools.

Data Collection

SRI International worked collaboratively with the Office of Superintendent of Public Instruction (OSPI) to design and implement an online survey to gather information from districts and schools with kindergarten classrooms in Washington State. An invitation to complete the online survey was sent to principals of all elementary schools with kindergarten classrooms in the state ($N = 1,307$) and to all District Assessment Coordinators serving districts including schools with kindergarten classrooms ($N = 301$). The invitation was sent on September 25, 2008, and respondents were asked to complete the survey by October 8, 2008.

Survey Respondents

A total of 273 online surveys were completed by representatives from districts ($n = 25$) and schools ($n = 248$) in Washington State. In an effort to understand school-level kindergarten assessment processes currently in use, each district-level survey submitted was weighted to be representative of the number of schools with kindergarten classrooms in the district. If a school in that district also submitted a survey, that school was not included in the district weighting. Thus, the data obtained from the 273 completed online surveys provide information about assessment practices for 593 schools with kindergarten classrooms in Washington State. This represents roughly half (45%) of the total population of 1,307 schools with kindergarten classrooms in the state.

Four-fifths (80%) of schools represented in the sample reported conducting some form of schoolwide assessment process for children entering kindergarten. An additional 1% reported that although they do not currently conduct a schoolwide assessment of kindergarteners, they plan to do so in the near future. Nearly one-fifth (19%) of schools in the sample do not engage in a schoolwide assessment of entering kindergarten students.

Exhibit A1 presents the total number of respondents to the online survey and the number of respondents to the online survey who indicated that their district or school conducted a schoolwide assessment of entering kindergarten students, as well as their weighted sample sizes.

Appendix B-1: Washington State Kindergarten Assessment Processes—Online Survey Summary (cont'd)

Exhibit A1. Survey Response Rates

| | Respondents | Schools Represented | Percent of Schools Represented |
|---|-------------|---------------------|--------------------------------|
| Completed online survey | 273 | 593 | 45 |
| Conduct schoolwide assessment of entering kindergarten students | 189 | 472 | 36 |

Kindergarten Assessment Practices

The data presented in the remainder of this appendix represent the 472 schools in the weighted sample that indicated that they administer a schoolwide kindergarten assessment.

Assessment tools used. Of the schools that perform a schoolwide assessment of children entering kindergarten, more than half (60%) reported using only one assessment tool, 29% reported using two assessment tools, and 10% used three assessment tools. The remaining 1% reported using more than three tools.

The most commonly used assessment tool was the Dynamic Indicators of Basic Early Literacy Skills (DIBELS), used by more than half of the reporting schools (55%). Of those schools that reported using DIBELS, 39% use only that tool; the remaining 61% use DIBELS in combination with at least one other assessment tool. Nearly half of schools (47%) reported using at least one locally developed assessment tool. Of these locally developed assessment tools, 27% were developed by schools and their teachers; the remaining 20% were developed by a school district. Of those schools that use locally developed district tools, 59% use only that tool; the remaining 41% use at least one additional assessment tool as well. Of those schools that reported using tools locally developed by the school or teachers, 38% use only those tools; the remaining 62% use school- or teacher-developed tools in combination with other assessments.

Many fewer schools use a variety of additional standardized assessment tools, which include Read Well (5%), Developmental Reading Assessment (DRA) (4%), and Developmental Indicators for the Assessment of Learning (DIAL) (4%). All other assessment tools named were used by fewer than 3% of schools.

Appendix B-1: Washington State Kindergarten Assessment Processes—Online Survey Summary (cont’d)

Purposes for assessing entering kindergarten students. Survey respondents were asked to identify the key purpose(s) of each assessment tool used as part of their schoolwide assessment processes from a list of options. Although some schools used multiple assessment tools with unique purposes, the information presented here is aggregated across assessment tools used for each school. This approach provides a picture of the key purposes for assessing kindergarten students at the school level.

In general, schools identified multiple purposes for conducting assessments of entering kindergarten students. Across schools, the average number of purposes identified for conducting a schoolwide assessment process was 4.5. As shown in Exhibit A2, nearly all schools cited conducting a kindergarten assessment to inform classroom instruction for individual students (96%). Other commonly cited purposes for assessment included to inform instruction at the classroom level (88%) and to inform parents of children’s strengths and areas for growth (81%). Schools also use assessment information to screen for potential developmental delays (77%) and to inform planning for ongoing investment in early learning (60%). Additionally, 16% of schools wrote in an “other” purpose for conducting a schoolwide assessment that was not listed on the prepopulated list of options—to “balance classes” or to inform the placement of students in specific classrooms or instructional grouping. The remaining 8% of schools reported conducting kindergarten assessments for a variety of other nonspecified purposes.

Exhibit A2. Purposes of Assessment Tools

| Purpose of Assessment* | Percent |
|--|----------------|
| Inform instruction for individual students | 96 |
| Inform instruction on classroom level | 88 |
| Inform parents of children’s strengths and areas for growth | 81 |
| Identify potential developmental delays | 77 |
| Inform planning for ongoing investment in early learning | 60 |
| Support transition and alignment between ECE programs and K-12 schools | 22 |
| Other – Inform instructional grouping/placement | 16 |
| Other – Not specified by respondent | 8 |

* More than one response option could be selected.

Appendix B-1: Washington State Kindergarten Assessment Processes—Online Survey Summary (cont’d)

Areas of children’s skills and development assessed. Respondents were asked to identify domains of children’s development and skills that were assessed through their kindergarten entry assessment process from a list of options. Although some schools used multiple assessment tools, each potentially measuring different domains, the information presented here is aggregated across assessment tools used for each school. This approach provides a comprehensive picture of the domains measured during each school’s assessment process.

As shown in Exhibit A3, nearly all (98%) of reporting schools measure some aspect(s) of children’s language, communication, and literacy skills (e.g., children’s use of language, reading, and writing skills, and ability to communicate). A bit more than three-fourths of schools (77%) currently assess entering kindergarteners’ cognition and general knowledge (e.g., children’s ability to think about and understand the world around them, including knowledge about people, place, and things, math concepts, and ways to solve problems using logic and what they already know). Only one-quarter of schools (25%) assessed children’s physical health, well-being, and motor development (e.g., children’s physical health and ability to participate in daily activities). Across schools, the least commonly assessed domains were approaches toward learning (18%) (e.g., children’s approaches toward learning new skills, including being curious, persisting at tasks, being creative, paying attention, and thinking about what they have just learned) or social and emotional development (10%) (e.g., children’s ability to handle their own emotions and have positive relationship at home, at school, and in the community).

Only 5% of schools with a kindergarten entry assessment process reported using a process that measured all five domains of children’s development and skills. An additional 7% reported assessing four domains, while 24% assessed three, 43% assessed two, and 22% assessed one domain. The average number of domains measured by schools during a schoolwide assessment process was 2.3.

Exhibit A3. Domains Assessed by Schools

| Domain* | Percent |
|---|----------------|
| Language, communication, and literacy | 98 |
| Cognition and general knowledge | 77 |
| Physical well-being, health, and/or motor development | 25 |
| Approaches toward learning | 18 |
| Social and emotional development | 10 |

* More than one response option could be selected.

Appendix B-1: Washington State Kindergarten Assessment Processes—Online Survey Summary (cont'd)

Characteristics of schoolwide assessment processes. Most (87%) of schools conducting a schoolwide kindergarten assessment process assessed more than 90% of the incoming kindergarten class. The remaining 13% of schools assessed at least half of the incoming kindergarten class.

For the majority of schools responding to the survey (85%), participation in the assessment process was not voluntary for families.

The majority of schools (82%) with a kindergarten entry assessment process indicated that they had not gathered parent or family input when selecting or designing the assessment process they currently use. Nearly one-fifth of schools (18%) reported that parent input was gathered during the assessment selection process.

Three-fourths of schools (75%) responding to the survey administered at least one assessment tool within the first month of school. A third of schools (33%) reported administering at least one assessment tool during kindergarten enrollment, before children begin school; 16% of schools reported administering at least one assessment tool later in the school year.

Eighty-five percent of schools indicated that kindergarten teachers conducted at least one of their schoolwide assessments of children. Sixty-three percent of schools indicated that at least one of their assessments was administered by another school staff person, and 41% reported that assessments were conducted by assessment specialists. Only 4% of schools reported that at least one of their assessments was completed by the child's parent. Nearly one-fifth of schools (17%) reported only teachers as participating in the assessment process, while nearly three-quarters (70%) reported using a combination of teachers, specialists, other school staff, and parents to administer the assessment process.

Nearly 70% of schools reported that at least one of the assessment tools currently in use was available only in English. Of the 33% of schools reporting using at least one assessment tool that was available in a language other than English, Spanish was by far the most commonly cited other language available (80%). Four percent of schools reported having assessment tools available in additional languages (e.g., French, Russian, Ukrainian).

More than half of the reporting schools (57%) indicated that they made accommodations for children with special needs during their schoolwide assessment process. Twenty-eight percent of schools made no special accommodations for children with special needs; an additional 13% of schools excluded children with special needs from the assessment process.

Nearly all schools (94%) reported that kindergarten assessment data were available at the individual student level. A bit more than three-quarters (77%) reported that data were available at the classroom level, and 71% indicated that data were available for the school overall. Across schools, assessment results were shared with school teachers and principals (99%), parents (83%), and district staff (64%).

Appendix B-1: Washington State Kindergarten Assessment Processes—Online Survey Summary (cont'd)

Summary and Conclusion

Representatives from nearly half of all schools with kindergarten classrooms in Washington State responded to an online survey requesting information on schoolwide kindergarten assessment processes currently in use. Eighty percent of represented schools currently conduct some form of assessment with entering kindergarten students.

Schools reported conducting a schoolwide assessment of kindergarteners for multiple purposes, the most commonly cited purposes including informing instruction (for individual students and at the classroom level) and informing parents of their children's strengths and areas for growth. Assessment processes currently used by Washington State schools responding to the online survey mostly measured only two areas of children's development and skills (e.g., language and cognition) and thus were not comprehensive in nature. Schools were least likely to measure children's social and emotional development with current assessment processes.

More than half of schools currently use only one assessment tool. More than half of reporting schools reported using DIBELS, either alone or as part of a multitool assessment process. Almost half of schools reported using unstandardized tools developed locally by districts, schools, and teachers to assess children. The vast majority of schools assessed all incoming kindergarten students at entry or within the first month of school. Most schoolwide assessment processes involved a combination of teachers and other people, including specialists and other school staff, in the assessment of children. Most schools reported that at least one assessment was available only in English, and a bit more than half of schools reported making accommodations for children with special needs during the assessment process. Participation in the assessment process is rarely voluntary.

This summary of kindergarten assessment practices currently under way in Washington State provides a context for thinking about how a statewide kindergarten assessment process could duplicate or augment common local practices.

Appendix B-2: Stakeholder Priorities for a Statewide Kindergarten Assessment Process—Online Survey Summary

To inform the development of recommendations about a statewide kindergarten assessment process, SRI International surveyed a variety of stakeholders about their priorities for such a process in Washington State. This document summarizes data from the survey.

Data Collection

SRI International collaborated with the Department of Early Learning (DEL), the Office of Superintendent of Public Instruction (OSPI), and Thrive by Five Washington to design and implement an online survey to gather information from a variety of Washington State stakeholders about their priorities for a statewide kindergarten assessment process. The online survey and an introductory presentation were posted in English and Spanish on the DEL website for anyone wishing to give input. Both were available during the last 2 weeks of October 2008.

The opportunity to participate in the survey was advertised through flyers posted at and distributed by schools, libraries, and other community-based organizations; announcements made at statewide conferences of early care and education (ECE) providers and a Tribal Congress meeting; letters to each of the federally recognized Washington Indian Tribes; e-mails to all schools, districts, and Educational Service Districts (ESDs); e-mails to Early Childhood Education and Assistance Program (ECEAP) agencies, Head Start programs, and licensed home child care providers, Infant and Toddler Early Intervention Program (ITEIP) contractors, and participants in electronic mailing lists; and e-mails to staff and members of organizations concerned with early childhood and school readiness issues. All announcements encouraged people to forward information about the presentation and online survey to others they thought might be interested in participating in the process. In addition, all the e-mails sent to schools and other agency staff encouraged them to forward the survey announcements and flyers to parents.

In addition to the survey, SRI gathered input through in-person and phone conversations. These included a conference call with early learning and assessment experts, a conference call with cultural competency experts, a discussion with ECE providers at the statewide Washington Association for the Education of Young Children (WAEYC) meeting, and a number for people to call to provide feedback to DEL interviewers. Only data collected through the online survey are reported here.

Survey Respondents

A total of 1,476 Washington State stakeholders completed the online survey, 7 of whom completed the Spanish version. An impressive 90% of stakeholders ($n = 1,349$) provided complete answers to all survey items; 9% ($n = 127$) submitted incomplete surveys (i.e., skipped some survey items). Exhibit B20 at the end of this report provides for each survey item the number of respondents who answered the item, selected *Not applicable; there should not be a statewide kindergarten assessment process*, and left the item blank (i.e., *Missing*). Most of the

Appendix B-2: Stakeholder Priorities for a Statewide Kindergarten Assessment Process—Online Survey Summary (cont'd)

percentages provided in this appendix were calculated excluding *Not applicable; there should not be a statewide kindergarten assessment process* and missing responses.

Individuals who indicated that they strongly or somewhat disagree with the idea of developing a kindergarten assessment process were given the option to answer subsequent survey questions substantively or to indicate *Not applicable; there should not be a kindergarten assessment process*. These respondents were likely to indicate *Not applicable; there should not be a statewide kindergarten assessment process* on the majority, but not all, of subsequent survey items. Additionally, individuals who indicated that they strongly or somewhat agree with the idea of developing a statewide kindergarten assessment process sometimes selected *Not applicable; there should not be a statewide kindergarten assessment process* on subsequent questions. For these reasons, percentages provided in this report were calculated excluding “not applicable” and missing responses.

Surveys were completed by at least one stakeholder in each of Washington State’s 39 counties. In addition, surveys were completed by at least one representative of 12 of the state’s 29 federally recognized tribes. Even though each county and some of the Washington Indian Tribes are represented in the data, the priorities of survey respondents described here should not be viewed as representative of all constituents in the state or of members of Washington Indian Tribes because participants were invited to complete the survey through targeted and purposive outreach strategies and were not randomly sampled from the population at large. Additionally, the percentages presented for Washington Indian Tribe representatives reflect a smaller number of individuals compared with other stakeholder groups.

Exhibit B1 presents the percentages and numbers of respondents to the online survey, by stakeholder group. The most respondents were in the groups of school principals, teachers, and staff; ECE providers and program directors; and parents and other caregivers. Common stakeholders in the *Other* category were health professionals, family educators and service providers, nonprofit agency staff, and social workers.

Appendix B-2: Stakeholder Priorities for a Statewide Kindergarten Assessment Process—Online Survey Summary (cont’d)

Exhibit B1. Survey Respondents, by Stakeholder Group

| Stakeholder Group | Percent | Number |
|--|----------------|---------------|
| School principals, teachers and staff | 27 | 392 |
| ECE providers and program directors | 24 | 350 |
| Parents and other relative caregivers | 22 | 327 |
| Early learning and assessment experts, Including researchers, policy-makers and professors | 13 | 186 |
| ESD and school district administrators and staff | 8 | 112 |
| Washington Indian Tribe representatives | 2 | 30 |
| Other | 5 | 79 |
| Total | 100 | 1,476 |

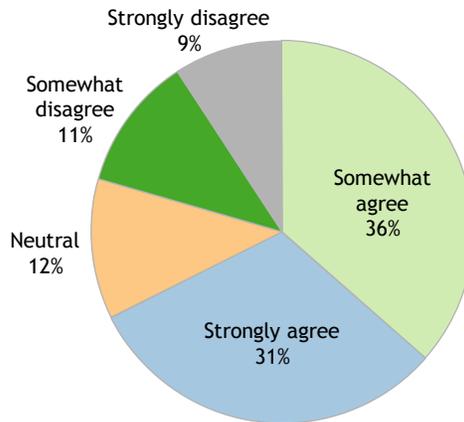
Forty-four percent of survey respondents reported that they either currently work with or provide care for at least one child who speaks a language other than English as his or her primary language. Of these, most were school or ECE staff. Fifty-five percent of respondents reported that they either currently work with or provide care for at least one child with a disability or other special need. Most of them were school or ECE staff or representatives from Washington Indian Tribes.

Priorities for a Kindergarten Assessment Process

Agreement with the idea of a statewide kindergarten assessment process. Stakeholders in Washington State had diverse opinions about the idea of developing a statewide kindergarten assessment process. The majority, however, favored the idea. Two-thirds (67%) of respondents reported that they strongly or moderately agree with the idea (Exhibit B2). In contrast, a large minority (20%) of respondents indicated that they strongly or moderately disagree with the idea.

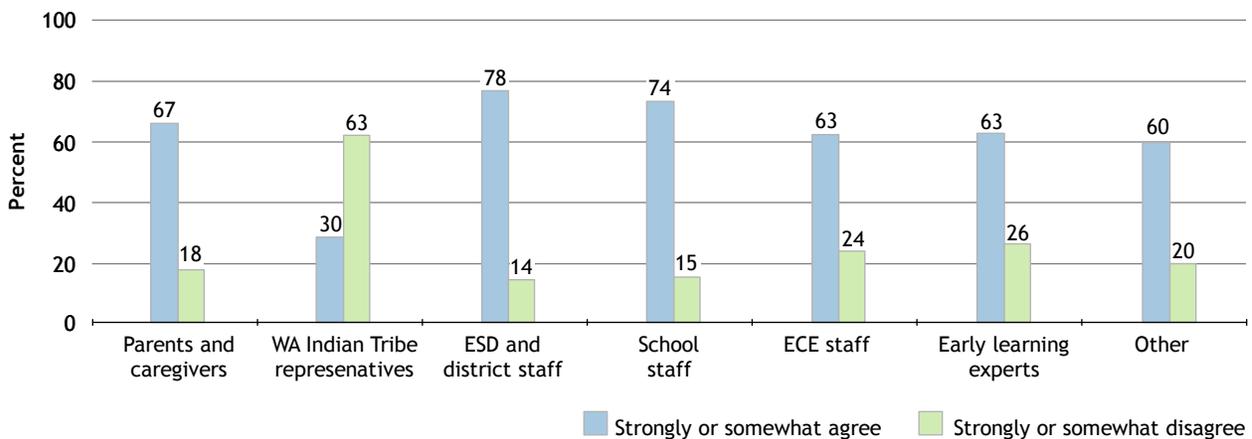
Appendix B-2: Stakeholder Priorities for a Statewide Kindergarten Assessment Process—Online Survey Summary (cont’d)

Exhibit B2. Stakeholder Agreement with the Idea of Developing a Statewide Kindergarten Assessment Process, Overall



Support for developing a statewide kindergarten assessment process varies by stakeholder group. Somewhat higher percentages of ESD and district staff (78%) and school personnel (74%) agree with the idea of developing a statewide kindergarten assessment process, compared with other stakeholder groups (Exhibit B3). In contrast, less than one-third (30%) of Washington Indian Tribe respondents indicated that they strongly or moderately agree with the idea.

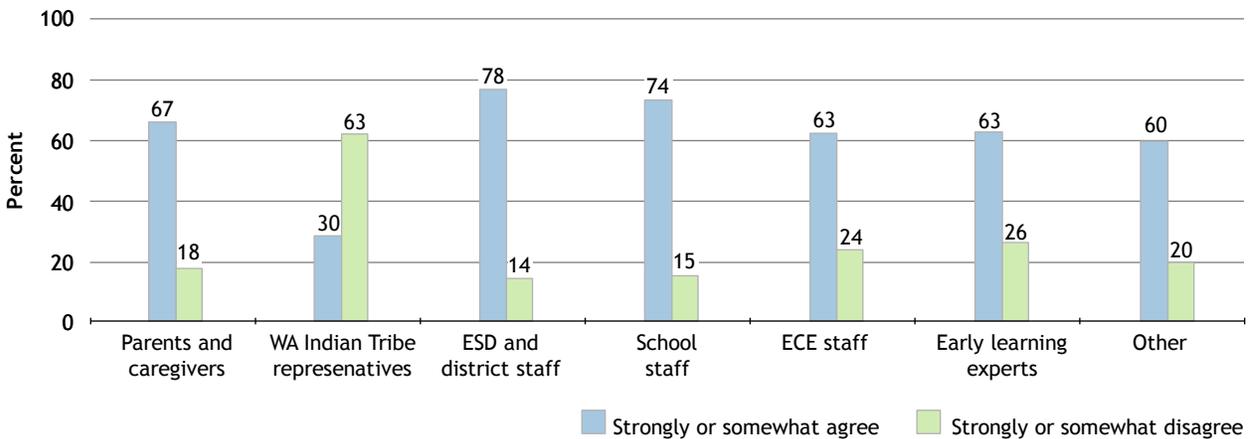
Exhibit B3. Agreement and Disagreement with the Idea of Developing a Statewide Kindergarten Assessment Process, by Stakeholder Group



Appendix B-2: Stakeholder Priorities for a Statewide Kindergarten Assessment Process—Online Survey Summary (cont'd)

Support for developing a statewide kindergarten assessment process varies by stakeholder group. Somewhat higher percentages of ESD and district staff (78%) and school personnel (74%) agree with the idea of developing a statewide kindergarten assessment process, compared with other stakeholder groups (Exhibit B3). In contrast, less than one-third (30%) of Washington Indian Tribe respondents indicated that they strongly or moderately agree with the idea.

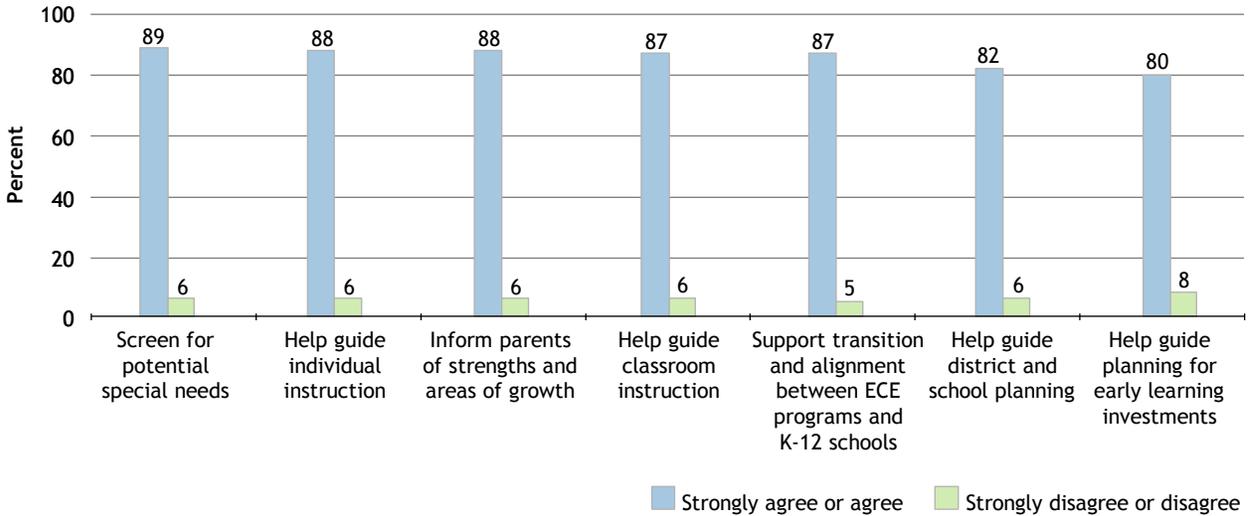
Exhibit B3. Agreement and Disagreement with the Idea of Developing a Statewide Kindergarten Assessment Process, by Stakeholder Group



Purposes of assessment. Information gathered through a kindergarten assessment process can be used for a number of purposes. Survey respondents were asked how strongly they agree with the appropriateness of seven possible purposes for a statewide process in Washington. Exhibit B4 shows the percentage of respondents who reported they strongly agree or agree with the percentage who strongly disagree or disagree with each purpose listed in the survey. In general, respondents strongly agree or agree with most of the seven purposes. Support was slightly lower for using a statewide kindergarten assessment to help guide district and school planning and planning for statewide investments in early learning.

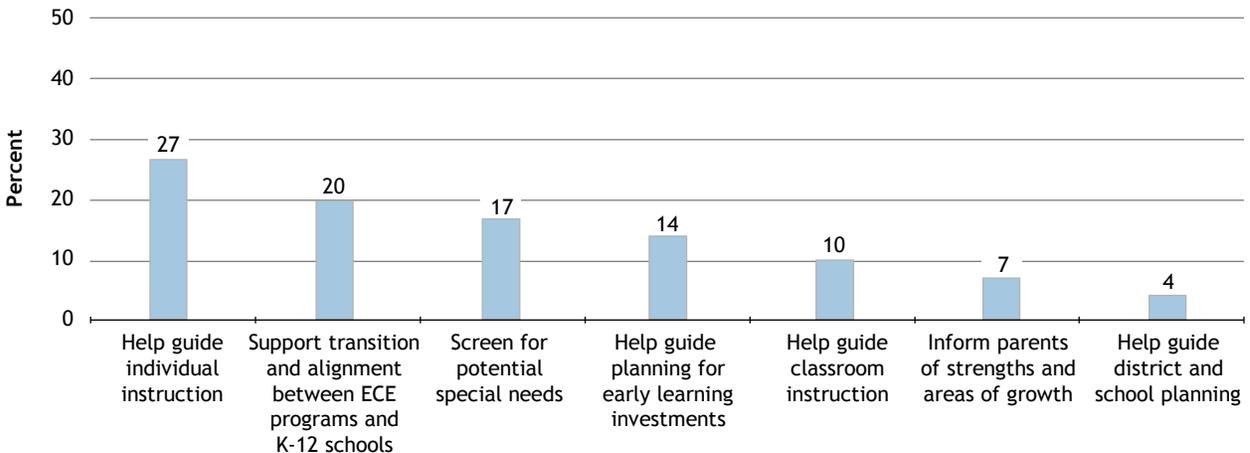
Appendix B-2: Stakeholder Priorities for a Statewide Kindergarten Assessment Process—Online Survey Summary (cont’d)

Exhibit B4. Stakeholder Agreement and Disagreement with Purposes of Assessment, Overall



Respondents were then asked to identify which of the seven purposes they considered the most important for a statewide kindergarten assessment process. The purpose identified as most important was to help guide instruction for individual students, with 27% of all respondents choosing this option (Exhibit B5). The purposes least commonly identified as most important were to inform parents of children’s strengths and areas for growth (7%) and to help guide district and school planning (4%).

Exhibit B5. Most Important Purpose of Assessment Identified by Stakeholders, Overall



Appendix B-2: Stakeholder Priorities for a Statewide Kindergarten Assessment Process—Online Survey Summary (cont'd)

For most stakeholder groups (Exhibit B6), the most important purpose for a statewide kindergarten assessment process was to guide instruction for individual students. However, ECE staff identified supporting the transition and alignment between ECE programs and K-12 schools as the most important purpose, and representatives from Washington Indian Tribes identified screening as the most important purpose for conducting an assessment process. For the most part, helping to guide planning at the district or school level was least often identified as the most important purpose across all stakeholder groups.

Exhibit B6. Most Important Purpose of Assessment, by Stakeholder Group

| Purpose | Percent Who Rated Purpose as Most Important | | | | | | |
|--|---|------------------------------------|---------------------------|-----------------|--------------|---------|-------|
| | Parents/ Caregivers | WA Indian Tribe Representatives | ESD/ District Staff | School Staff | ECE Staff | Experts | Other |
| Help guide individual instruction | 36 | 26 | 32 | 23 | 21 | 30 | 26 |
| Help guide classroom instruction | 12 | 15 | 10 | 15 | 7 | 6 | 6 |
| Screen for potential special needs | 16 | 32 | 12 | 20 | 22 | 10 | 13 |
| Inform parents of strengths and areas of growth | 10 | 0 | 5 | 6 | 4 | 10 | 15 |
| Support transition and alignment between ECE programs and K-12 schools | 15 | 26 | 19 | 17 | 30 | 20 | 24 |
| Help guide district and school planning | 2 | 0 | 7 | 3 | 4 | 6 | 7 |
| Help guide planning for early learning investments statewide | 9 | 11 | 16 | 16 | 13 | 19 | 9 |

Areas of children’s skills and development to be assessed. Respondents were asked to indicate the importance of including measures of five areas of children’s skills and development in a statewide kindergarten assessment process (Exhibit B7). Generally, respondents thought that all five areas are very or somewhat important to include in a statewide kindergarten assessment process. However, respondents believed it was particularly (i.e., very) important to include social and emotional development (71%) and language, communication, and literacy (68%) in a statewide kindergarten assessment process.

Appendix B-2: Stakeholder Priorities for a Statewide Kindergarten Assessment Process—Online Survey Summary (cont'd)

Exhibit B7. Stakeholder Perceptions of Importance of Measuring Specific Areas of Development, Overall

| Area | Percent | | | | |
|---|----------------|--------------------|---------|--------------------|----------------------|
| | Very Important | Somewhat Important | Neutral | Not Very Important | Not at All Important |
| Social and emotional development | 71 | 21 | 5 | 1 | 1 |
| Language, communication, and literacy | 68 | 24 | 5 | 1 | 1 |
| Physical well-being, health, and/or motor development | 56 | 33 | 8 | 2 | 1 |
| Cognition and general knowledge | 56 | 32 | 8 | 2 | 1 |
| Approaches toward learning | 55 | 33 | 8 | 3 | 1 |

Views on the importance of measuring various areas of children’s development varied by stakeholder group (Exhibit B8). Higher percentages of stakeholders in all groups except ESD and district staff rated aspects of children’s social and emotional development as very important to measure, compared with other areas of development. Higher percentages of ESD and district staff (66%) rated language, communication, and literacy skills and cognition and general knowledge as very important to measure as part of a statewide kindergarten assessment process, compared with other areas of children’s skills and development.

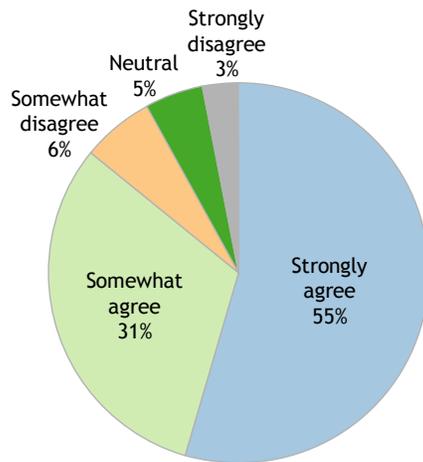
Appendix B-2: Stakeholder Priorities for a Statewide Kindergarten Assessment Process—Online Survey Summary (cont’d)

Exhibit B8. Perceptions of Importance of Measuring Specific Areas of Development, Perceptions of Stakeholder Group

| Area | Percent of Respondents Who Rated Area as Very Important | | | | | | |
|---|---|------------------------------------|---------------------------|-----------------|-----------|---------|-------|
| | Parents/ Caregivers | WA Indian Tribe Representatives | ESD/ District Staff | School Staff | ECE Staff | Experts | Other |
| Social and emotional development | 58 | 58 | 64 | 68 | 83 | 83 | 83 |
| Language, communication, and literacy | 55 | 30 | 66 | 62 | 52 | 51 | 69 |
| Physical well-being, health, and/or motor development | 47 | 50 | 58 | 54 | 63 | 63 | 64 |
| Cognition and general knowledge | 55 | 30 | 66 | 62 | 52 | 51 | 50 |
| Approaches toward learning | 55 | 37 | 50 | 49 | 60 | 61 | 63 |

As shown in Exhibit B9, the vast majority of respondents (86%) strongly or moderately agree that a statewide kindergarten assessment process should be comprehensive—that it should gather information on all five areas of children’s skills and development listed in Exhibits B7 and B8. Only 9% of respondents reported that they strongly or somewhat disagree with the idea of a comprehensive assessment process.

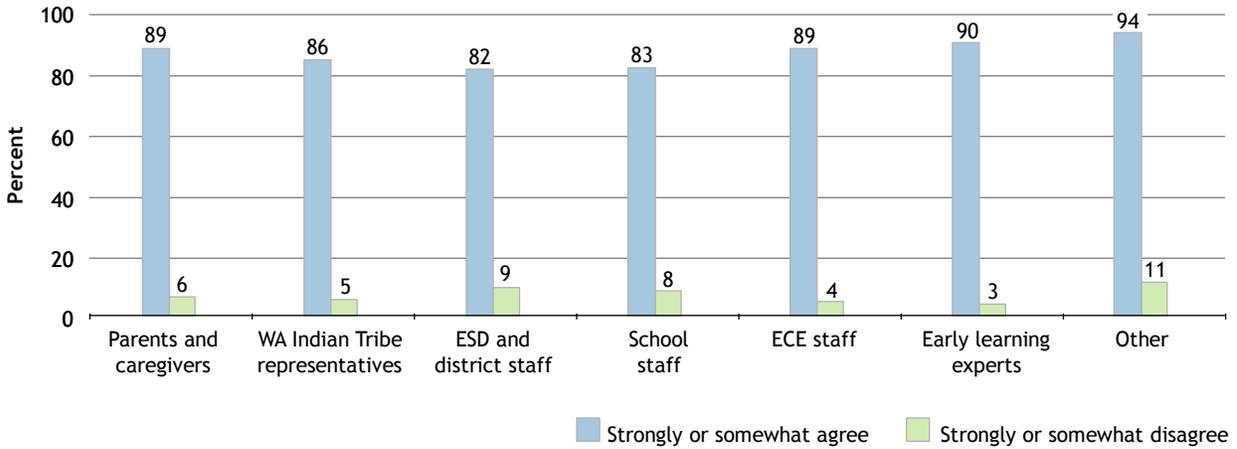
Exhibit B9. Stakeholder Agreement with a Comprehensive Kindergarten Assessment Process, Overall



Appendix B-2: Stakeholder Priorities for a Statewide Kindergarten Assessment Process—Online Survey Summary (cont’d)

Consensus existed among most stakeholder groups with the idea that a statewide kindergarten assessment process should be comprehensive (Exhibit B10).

Exhibit B10. Agreement with a Comprehensive Kindergarten Assessment Process, by Stakeholder Group



Approaches to implementation of a kindergarten assessment process statewide. Survey respondents were asked how strongly they agree with statements describing four potential approaches to implementing a statewide kindergarten assessment process that varied in degree of choice and standardization across schools. Exhibit B11 compares the percentage of respondents who reported that they strongly or moderately agree with the percentage who strongly or moderately disagree with the implementation approaches listed in the survey. In general, there was an overall desire for some standardization of approach, such as using an assessment process that provides options from a specified list (65%), requiring schools to use processes that meet specified criteria (54%), or stipulating using the same tools and methods for all districts (54%). Fewer respondents indicated that they strongly or moderately agree (42%) that all decisions about a kindergarten assessment process should be made by individual districts with technical assistance from the state or others.

Appendix B-2: Stakeholder Priorities for a Statewide Kindergarten Assessment Process—Online Survey Summary (cont’d)

Exhibit B11. Stakeholder Agreement with Potential Implementation Approaches, Overall

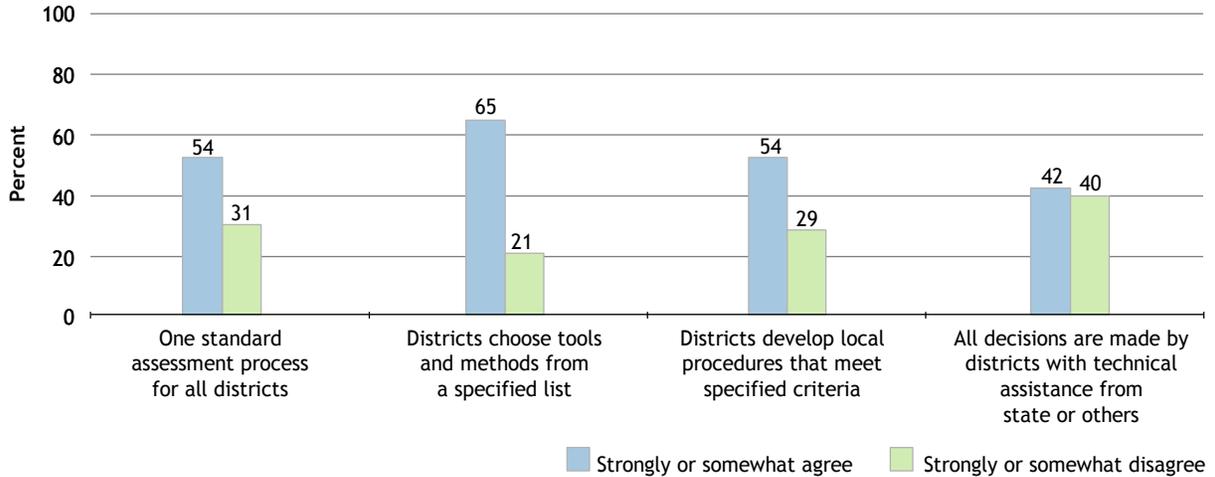


Exhibit B12 shows the percentage of respondents in each stakeholder group who reported that they strongly or moderately agree with each of the four potential approaches to implementing a statewide process. All but one of the stakeholder groups thought districts should be allowed to choose tools and methods from a specified list. Representatives from Washington Indian Tribes indicated that they strongly or moderately agree with a process in which districts are able to develop local procedures that meet a specified set of criteria or in which all decisions are made by individual districts with technical assistance. Washington Indian Tribe representatives also were the least supportive of the implementation approach of all districts using one standard assessment process. Other stakeholder groups were least supportive of a process that allowed all decisions to be made by districts or schools with technical assistance from the state or others.

Exhibit B12. Agreement with Potential Implementation Approaches, by Stakeholder Group

| Approach | Percent of Respondents Who Strongly or Moderately Agree | | | | | | |
|--|---|------------------------------------|---------------------------|-----------------|--------------|---------|-------|
| | Parents/ Caregivers | WA Indian Tribe Representatives | ESD/ District Staff | School Staff | ECE Staff | Experts | Other |
| One standard assessment process for all districts | 58 | 29 | 58 | 58 | 51 | 46 | 51 |
| Districts choose tools and methods from a specified list | 65 | 38 | 68 | 68 | 62 | 66 | 62 |
| Districts develop local procedures that meet specified criteria | 54 | 57 | 51 | 53 | 57 | 50 | 62 |
| All decisions are made by districts with technical assistance from state or others | 41 | 50 | 37 | 43 | 44 | 36 | 39 |

Appendix B-2: Stakeholder Priorities for a Statewide Kindergarten Assessment Process—Online Survey Summary (cont’d)

Inclusion of parent input. Respondents were asked whether they agree that parent input must be included as an information source in a kindergarten assessment process. The majority of respondents (87%) strongly or moderately agree with the assertion that a statewide kindergarten assessment process in Washington State must include information gathered from parents (Exhibit B13). Only 6% of respondents reported that they strongly or moderately disagree that information must be gathered from parents. Furthermore, the majority of respondents in all stakeholder groups were in favor of gathering information from parents and other caregivers as part of an assessment process (Exhibit B14).

Exhibit B13. Agreement with Necessity of Including Parent Input, Overall

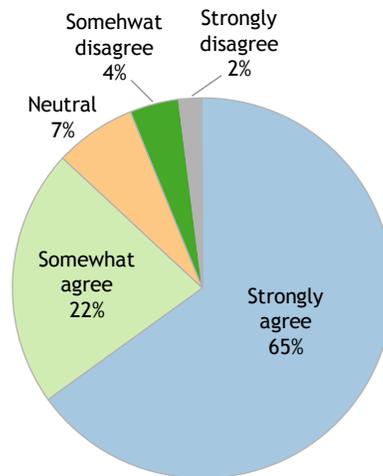
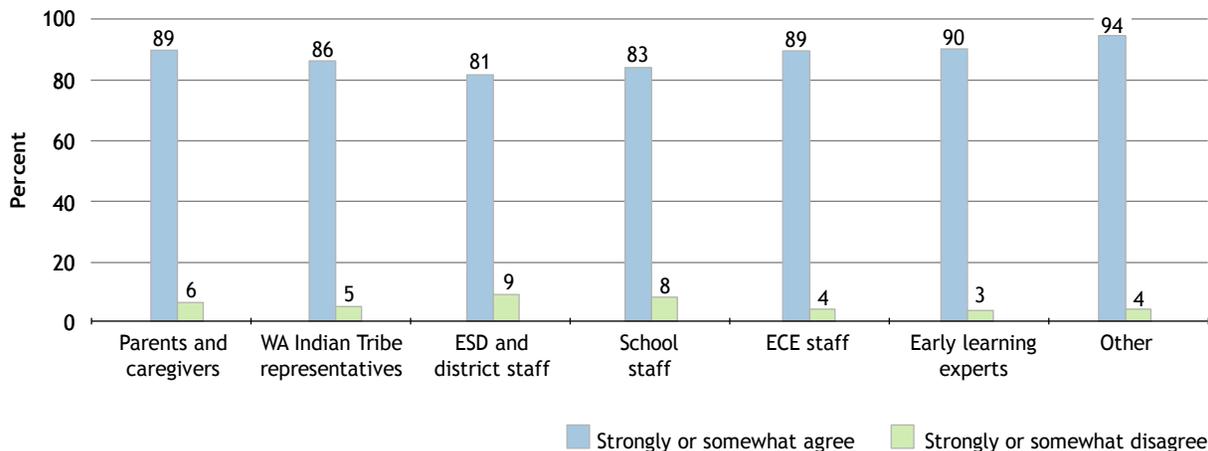


Exhibit B14. Agreement with Necessity of Including Parent Input, by Stakeholder Group



Appendix B-2: Stakeholder Priorities for a Statewide Kindergarten Assessment Process—Online Survey Summary (cont'd)

Approaches to collecting information on children’s skills and development. Information on children’s skills and development can be collected by using a variety of approaches. Some of these approaches are direct assessments, with teachers or trained assessors asking children to perform standardized tasks and then recording the results. Other approaches involve having teachers or others who know the children well gather information on their skills and development by observing them perform tasks in their natural settings and recording the results by using checklists, questionnaires, and rating scales and, in some cases, rating samples of children’s work. Respondents were asked how strongly they agree with three possible approaches for collecting information on what children know and are able to do. Exhibit B15 compares the percentage of respondents who indicated they strongly or moderately agree with the percentage who strongly or moderately disagree with the information collection approaches listed in the survey. Generally, respondents held favorable opinions of all three approaches.

Exhibit B15. Agreement with Approaches to Collection of Information, Overall

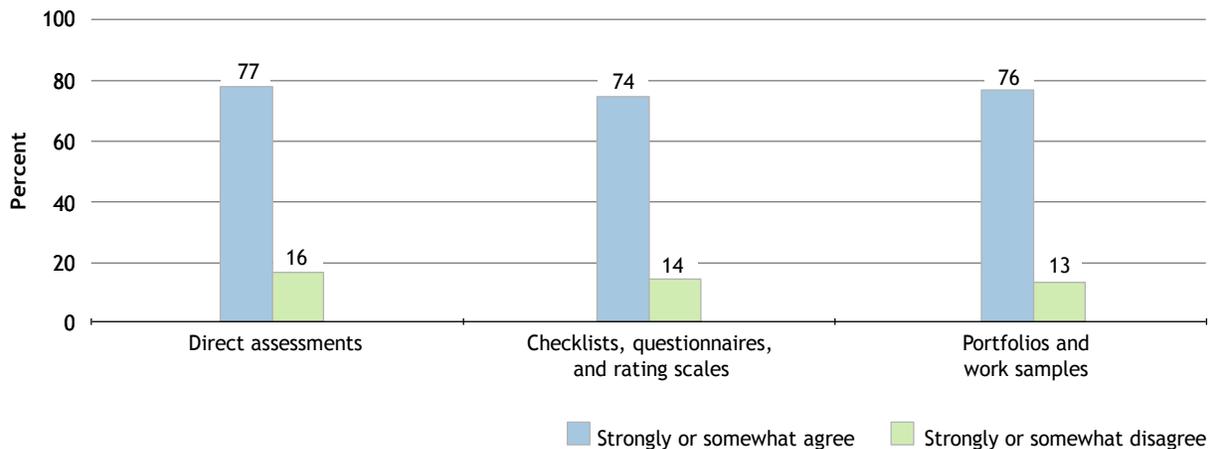


Exhibit B16 shows the percentage of respondents from different stakeholder groups who indicated that they strongly or moderately agree with each of three potential approaches to collecting assessment information. Differences were evident among stakeholder groups; for example, parents (80%), ESD and district staff (82%), and school staff (91%) favored using direct assessments, compared with other approaches for collecting information on children. This differed from the priorities of Washington Indian Tribe representatives (68%), ECE staff (82%), and early learning experts (82%), who favored collecting information on children’s skills and development by using portfolios and work samples.

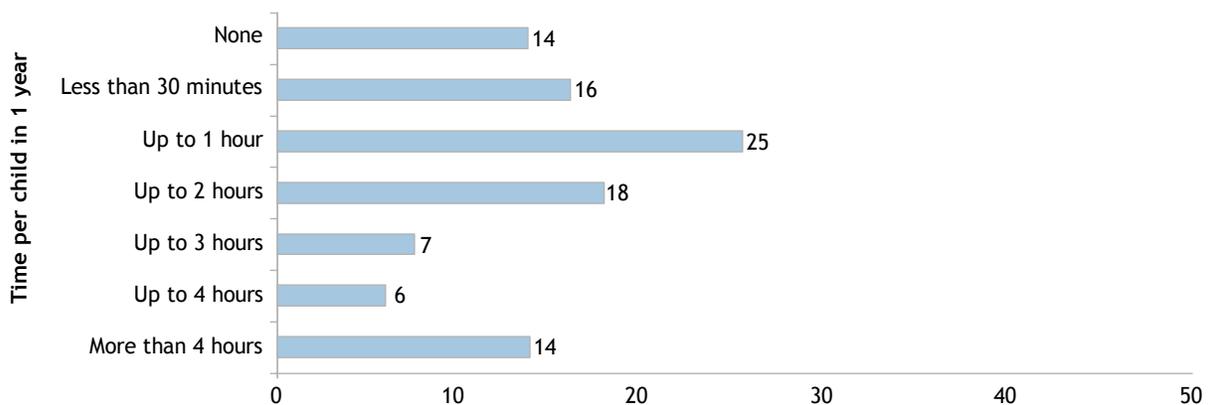
Appendix B-2: Stakeholder Priorities for a Statewide Kindergarten Assessment Process—Online Survey Summary (cont’d)

Exhibit B16. Agreement with Data Collection Approaches, by Stakeholder Group

| Approach | Percent of Respondents Who Strongly or Moderately Agree | | | | | | |
|---|---|------------------------------------|---------------------------|-----------------|--------------|---------|-------|
| | Parents/ Caregivers | WA Indian Tribe Representatives | ESD/ District Staff | School Staff | ECE Staff | Experts | Other |
| Direct assessments | 80 | 62 | 82 | 91 | 63 | 63 | 73 |
| Checklists, questionnaires, and rating scales | 76 | 62 | 72 | 73 | 75 | 78 | 65 |
| Portfolios and work samples | 75 | 68 | 73 | 69 | 82 | 82 | 74 |

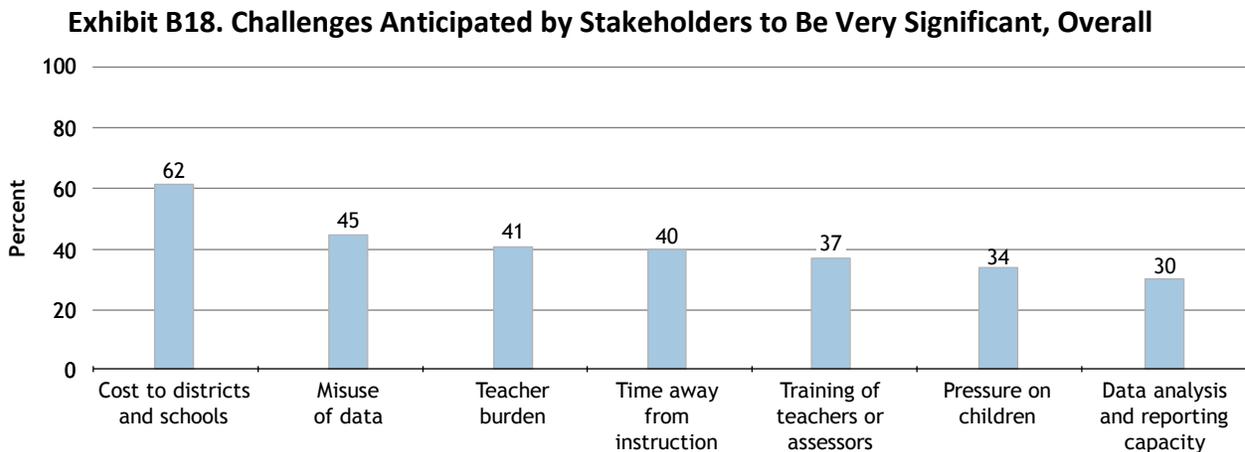
Instructional time willing to invest in the assessment process. Respondents varied widely in the amount of instructional time they are willing to invest in a kindergarten assessment process. As shown in Exhibit B17, 25% of respondents indicated they would invest up to 1 hour of instructional time per child each year for assessment, and 45% indicated a willingness to invest more than 1 hour of time. Some respondents were less willing to spend instructional time on a kindergarten assessment, with 16% wanting to spend less than 30 minutes per child and 14% not wanting to invest any instructional time on the assessment. Seventy-three percent of those not wanting to invest any time in a process also indicated that they strongly disagree with the idea of a statewide kindergarten assessment process.

Exhibit B17. Instructional Time Stakeholders Are Willing to Invest, Overall



Appendix B-2: Stakeholder Priorities for a Statewide Kindergarten Assessment Process—Online Survey Summary (cont'd)

Potential challenges. Respondents also were asked how significant a challenge to implementing a statewide kindergarten assessment process they believed seven issues might be (Exhibit B18). The majority of respondents (62%) indicated that cost to schools and districts is a very significant implementation challenge. More than two-fifths of respondents indicated that potential misuse of data (45%), teacher burden (41%), and time away from classroom instruction (40%) might be very significant implementation challenges.



Respondents in all stakeholder groups identified cost to schools and districts as a very significant challenge (Exhibit B19). For early learning experts, ECE staff, and representatives from Washington Indian Tribes, potential misuse of data is also a significant anticipated challenge. Representatives from Washington Indian Tribes also rated pressure on children as a very significant anticipated challenge.

Appendix B-2: Stakeholder Priorities for a Statewide Kindergarten Assessment Process—Online Survey Summary (cont'd)

Exhibit B19. Potential Implementation Challenges, by Stakeholder Group

| Challenge | Percent of Respondents Who Rated Challenge as Very Significant | | | | | | |
|--------------------------------------|--|------------------------------------|---------------------------|-----------------|-----------|---------|-------|
| | Parents/ Caregivers | WA Indian Tribe Representatives | ESD/ District Staff | School Staff | ECE Staff | Experts | Other |
| Cost to districts and schools | 58 | 71 | 71 | 70 | 59 | 53 | 60 |
| Training of teachers or assessors | 33 | 46 | 37 | 35 | 39 | 43 | 37 |
| Misuse of data | 39 | 71 | 45 | 35 | 53 | 52 | 50 |
| Data analysis and reporting capacity | 27 | 64 | 29 | 26 | 35 | 35 | 25 |
| Time away from instruction | 27 | 37 | 39 | 56 | 39 | 31 | 32 |
| Teacher burden | 33 | 46 | 37 | 54 | 40 | 35 | 38 |
| Pressure on children | 30 | 68 | 22 | 27 | 41 | 39 | 36 |

Additional planning needed. Respondents were asked how much time they think is needed for dialogue between the state and stakeholder groups about a statewide kindergarten assessment before piloting one. A little more than half (52%) reported that at least 6 to 12 months of planning time is needed, and an additional 35% reported that more than a year of planning and dialogue is necessary. Seventeen percent of respondents believed less than 6 months is needed to plan and dialogue.

Respondents also were asked whether they would like to be personally involved in the next steps of dialogue about a statewide kindergarten assessment process. Forty-four percent indicated that they would like to be personally involved and submitted their contact information; this included representation from all stakeholder groups. Early learning experts, ESD or district staff, and representatives from Washington Indian Tribes were more likely to indicate a desire for further involvement than other stakeholder groups.

Finally, respondents were asked whether they were interested in having their school or district participate in a pilot of a statewide kindergarten assessment process. Thirty-seven percent of survey respondents indicated that they would be interested and submitted their school's or district's name.

Appendix B-2: Stakeholder Priorities for a Statewide Kindergarten Assessment Process—Online Survey Summary (cont'd)

Summary and Conclusion

Stakeholders from each of Washington State's 39 counties and 12 of the 29 federally recognized Washington Indian Tribes completed an online survey asking about their priorities for developing a statewide kindergarten assessment process.

Stakeholders in Washington have diverse opinions about the development of a statewide kindergarten assessment process. Whereas the majority of respondents supported the idea, 21% did not. Respondents regarded most of the purposes listed in the survey as appropriate for an assessment process. As a whole, the respondents most commonly cited guiding instruction for individual students as the most important purpose, followed by supporting transition and alignment between ECE programs and K-12 schools and screening children for potential developmental delays and other special needs. ECE staff, however identified supporting the transition between ECE programs and K-12 schools as the most important purpose, and representatives from Washington Indian Tribes indicated that screening children for potential delays and other special needs was the most important purpose for conducting a statewide assessment process.

The majority of respondents in all stakeholder groups believed the process should be comprehensive and capture information on all five areas of children's skills and development, but that social and emotional development and language, communication, and literacy are of utmost importance. Stakeholders except ESD and district staff rated aspects of children's social and emotional development as more important to measure, compared with other areas of development. ESD and district staff more often rated language, communication, and literacy skills and cognition and general knowledge as very important to measure.

In general, stakeholders agree with having some level of standardization in the assessment implementation approach. Most respondents support the idea of using an assessment implementation process that requires districts to choose tools and methods from a specified list of options and disagree with a process that requires all decisions to be made by individual districts. Representatives from Washington Indian Tribes disfavored using one standard assessment implementation process more than other stakeholder groups.

The majority of stakeholders believed that a kindergarten assessment process must include information gathered from parents and caregivers. Similarly, respondents held favorable opinions of multiple approaches to collecting information on children's skills and development, including the use of direct assessments; checklists, questionnaires, and rating scales; and portfolios and work samples. School staff most strongly agree with the use of direct assessments, whereas ECE staff, early learning experts, and representatives from Washington Indian Tribes agree less with their use. Opinions varied widely on the amount of instructional time stakeholders are willing to invest in conducting a statewide kindergarten assessment process: two-fifths were willing to invest up to 1 hour per child per year; slightly more were willing to invest more than 1 hour.

Appendix B-2: Stakeholder Priorities for a Statewide Kindergarten Assessment Process—Online Survey Summary (cont'd)

Respondents also identified multiple challenges they believe might be very significant to implementing a statewide kindergarten assessment process, including cost to schools and districts, potential misuse of data, teacher burden, time away from instruction, and training of teachers or assessors. Stakeholders from all groups indicated cost to schools and districts as a very significant challenge. For early learning experts, ECE staff, and representatives from Washington Indian Tribes, potential misuse of data also was anticipated to be a very significant challenge. Representatives from Washington Indian Tribes also anticipated pressure on children as a very significant challenge.

Regarding further planning, the vast majority of respondents indicated that more than 6 months and perhaps more than a year of planning time is needed for dialogue between the state and stakeholder groups before an assessment process is piloted. Also, almost half of respondents were interested in personally participating in this planning process, and more than a third were interested in having their schools or districts participate in a pilot kindergarten assessment process.

In conclusion, both variation and consensus exist for various aspects of a kindergarten assessment process among Washington State's stakeholders. The results of this survey provide a context for making decisions about next steps in developing a process. They suggest areas in which support for certain decisions may already be sufficient (e.g., including parents in the process, conducting a comprehensive assessment process), as well as areas where further dialogue and consensus building may be necessary (such as, purpose(s), time to invest in the process).

Appendix B-2: Stakeholder Priorities for a Statewide Kindergarten Assessment Process—Online Survey Summary (cont'd)

Exhibit B20. Stakeholder Survey Response Rates, by Item (N = 1,476)

| Survey Item | Number of Responses | | |
|--|---------------------|----------------|---------|
| | Answered | Not Applicable | Missing |
| Respondent characteristics | | | |
| County of residence | 1,476 | - | - |
| Respondent type (i.e., stakeholder group) | 1,476 | - | - |
| Work with or care for children who speak a language other than English as primary language | 1,476 | - | - |
| Work with or care for children with disabilities or other special needs | 1,476 | - | - |
| Idea of developing a statewide kindergarten assessment process | | | |
| Agree with idea of developing a statewide process | 1,476 | - | - |
| Purposes for a statewide kindergarten assessment process | | | |
| Help guide instruction for individual students | 1,357 | 77 | 42 |
| Help guide instruction at classroom level | 1,357 | 77 | 42 |
| Screen children for potential developmental delays or other special needs | 1,360 | 74 | 42 |
| Inform parents of children's strengths and areas for growth | 1,359 | 75 | 42 |
| Help guide planning for ongoing investment in early learning at the state level | 1,357 | 77 | 42 |
| Help guide planning at the district or school level | 1,356 | 78 | 42 |
| Support transition and alignment between ECE programs and K-12 schools | 1,354 | 80 | 42 |
| Most important purpose for a statewide kindergarten assessment process | | | |
| Most important purpose | 1,304 | 121 | 51 |
| Domains to be measured in a kindergarten assessment process | | | |
| Physical well-being, health, and/or motor development | 1,274 | 134 | 68 |
| Social and emotional development | 1,275 | 133 | 68 |
| Approaches toward learning | 1,282 | 126 | 68 |
| Cognition and general knowledge | 1,282 | 126 | 68 |
| Language, communication, and literacy | 1,285 | 123 | 68 |
| Comprehensiveness of assessment process | | | |
| Assessment process MUST be comprehensive | 1,269 | 139 | 68 |
| Parent input | | | |
| Assessment process MUST include information gathered from parents | 1,275 | 115 | 86 |

Appendix B-2: Stakeholder Priorities for a Statewide Kindergarten Assessment Process—Online Survey Summary (cont’d)

| Survey Item | Number of Responses | | |
|--|---------------------|----------------|---------|
| | Answered | Not Applicable | Missing |
| Approaches to implementing a statewide kindergarten assessment process | | | |
| One standard assessment process for all districts (i.e., the same process and set of tools and methods) | 1,254 | 136 | 86 |
| Districts choose tools and methods from a specified list (i.e., choose options from approved menus) | 1,261 | 129 | 86 |
| Districts develop local procedures that meet a specified set of criteria | 1,262 | 128 | 86 |
| All decisions for kindergarten assessment processes are made by individual districts with technical assistance provided by the state or others | 1,261 | 129 | 86 |
| Approaches to collecting assessment information | | | |
| Direct assessments in which teachers or trained assessors ask children to perform standardized tasks and then record the results | 1,243 | 132 | 101 |
| Checklists, questionnaires, and rating scales | 1,248 | 127 | 101 |
| Portfolios and work samples | 1,251 | 124 | 101 |
| Time willing to invest in statewide kindergarten assessment process | | | |
| Time willing to invest | 1,170 | 185 | 121 |
| Challenges to implementing a statewide kindergarten assessment process | | | |
| Cost to schools and districts | 1,355 | - | 121 |
| Training of teachers or assessors | 1,351 | - | 125 |
| How data may be misused | 1,352 | - | 124 |
| Ability to analyze and report the data | 1,347 | - | 129 |
| Time away from classroom instruction | 1,351 | - | 125 |
| Teacher burden | 1,353 | - | 123 |
| Pressure on children | 1,355 | - | 121 |
| Other | 306 | - | 1,170 |
| Planning and piloting | | | |
| Time for dialogue between state and stakeholders | 1,190 | 164 | 122 |
| Interested in being personally involved in planning | 1,354 | - | 122 |
| Interested in having school/district participate in pilot | 1,349 | - | 127 |

Appendix C-1: Child care consultation pre- and post-training surveys



Supporting
Successful
Relationships

Supporting Successful Relationships PRE-TRAINING Survey

1. Please list three social emotional needs of infants and toddlers.

2. Please list three techniques you use to manage a child with challenging behaviors.

Please rate the following questions as:

| | <i>Very</i> | <i>Somewhat</i> | <i>Not at all</i> |
|--|-------------|-----------------|-------------------|
| 3. I feel confident in my ability to: | | | |
| A.) identify elements essential to healthy relationship-formation | 1 | 2 | 3 |
| B.) identify possible underlying causes for children’s challenging behaviors | 1 | 2 | 3 |
| C.) provide a secure base for children regardless of their behavior | 1 | 2 | 3 |
| D.) guide children in ways that help them manage their own behavior | 1 | 2 | 3 |

Please rate the following statements on the scale of:

| | <i>All of the time</i> | <i>Most of the time</i> | <i>Some of the time</i> | <i>Rarely</i> | <i>Never</i> |
|---|------------------------|-------------------------|-------------------------|---------------|--------------|
| 4. I feel challenged to meet the social emotional needs of some of the children in my care. | 1 | 2 | 3 | 4 | 5 |
| 5. When presented with a scenario of a problem behavior, I can assess the child’s unmet needs and determine a plan for helping the child feel better about himself and his relationships with others. | 1 | 2 | 3 | 4 | 5 |

Appendix C-1: Child care consultation pre- and post-training surveys (cont'd)

6. In the past year, I have cared for children who have exhibited the following problem behaviors:

7. In the past year, I have discontinued care for a child due to the child's disruptive behaviors. Y ___ N ___

8. I hope to accomplish the following skills from this training:

9. Additional comments?

Thank you for your interest in promoting the social and emotional well-being of children.

Appendix C-1: Child care consultation pre- and post-training surveys (cont'd)



Supporting
Successful
Relationships

Promoting First Relationships Provider POST-TRAINING Survey

1. Please list three social-emotional needs of infants and toddlers.

2. Please list three techniques you can use to manage a child with challenging behaviors.

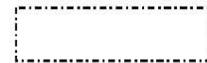
Please rate the following questions as:

| | <i>Very</i> | <i>Somewhat</i> | <i>Not at all</i> |
|--|-------------|-----------------|-------------------|
| 3. I feel confident in my ability to: | | | |
| A.) identify elements essential to healthy relationship-formation | 1 | 2 | 3 |
| B.) identify possible underlying causes for children’s challenging behaviors | 1 | 2 | 3 |
| C.) provide a secure base for children regardless of their behavior | 1 | 2 | 3 |
| D.) guide children in ways that help them manage their own behavior | 1 | 2 | 3 |

Please rate the following statements on the scale of:

| | <i>All of the time</i> | <i>Most of the time</i> | <i>Some of the time</i> | <i>Rarely</i> | <i>Never</i> |
|---|------------------------|-------------------------|-------------------------|---------------|--------------|
| 4. I feel challenged to meet the social emotional needs of some of the children in my care. | 1 | 2 | 3 | 4 | 5 |
| 5. When presented with a scenario of a problem behavior, I can assess the child’s unmet needs and determine a plan for helping the child feel better about himself and his relationships with others. | 1 | 2 | 3 | 4 | 5 |

CONT. ON BACK



Appendix C-1: Child care consultation pre- and post-training surveys (cont'd)

6. I have accomplished the following skills from this training:

7. Additional comments?

Thank you for your interest in promoting the social and emotional well-being of children.

Appendix C-2: Catholic Family & Child Services consultation satisfaction survey

**CONSULTATION PROGRAM FOR CHILD CARE PROVIDERS
PROVIDER SATISFACTION SURVEY**

Provider Name _____

Consultant Name _____

Date of consultation _____

Please circle the number which best reflects your response to each question.



1. I was satisfied with the length of time between my initial call for consultation and actual contact with this consultant.

1 2 3 4

2. I was satisfied with the information that I received.

1 2 3 4

3. The suggestions I received have been helpful in dealing with the specific situation.

1 2 3 4

4. It would be more helpful if...

5. How would you rate you interaction with this consultant?

1 2 3 4

6. Would you consider using this service again? YES NO

Appendix C-3: Sample resource manual

**WELCOME TO THE
TODDLER ROOM**

**A helpful guide for families about
toddler biting**

Appendix C-3: Sample resource manual (cont'd)**CHILD CARE HEALTH PROGRAM****Public Health – Seattle & King County****Welcome to the Toddler Room**

This is a very exciting time for you! Your toddler is walking and is starting to use words to communicate. Toddlers are filled with energy and love to explore using their newfound abilities to run and jump and climb! They like to make choices for themselves; though of course, they still need a lot of warm encouragement and support from the important adults in their lives.

Our classroom environment is designed to support your toddler's natural interest in exploration and activity. We always have books and puzzles in our classroom and a choice of materials for building and making things. Because many toddlers still experience the world by using their mouth, we make sure all materials are too large to be a choking risk. Our daily schedule includes both group time and outdoor time.

One of the most important things we are teaching toddlers is self-control and how to make friends. We do this by helping toddlers learn about their own feelings. For example, we may notice that they seem sad or frustrated and we let them know we noticed by describing or naming the feeling; saying things like "Sara, you look very frustrated. Did you want some help with the puzzle?" We try to model empathy for all the children since that will help them develop empathy themselves.

Second, we try to help them connect their feelings to their behavior. For example, Sara hits John and we comment: "Sara, you are upset because John grabbed your puzzle pieces. Let me help you and John solve this problem without hitting."

Sometimes, because toddlers are just learning about their feelings, just learning language, and just starting to be social,

Appendix C-3: Sample resource manual (cont'd)

they turn to biting as a way to communicate. In fact, biting is not uncommon for toddlers in group care. When a child is bitten, we immediately apply first aid. We calmly remind the biter that biting hurts our friends, and if we notice a possible reason for the bite, we help the biter make the connection between what they are feeling and their behavior. For example, if Johnny bites Sam because he wants him to move, we would say: "Johnny, it seems you wanted Sam to move. You can say 'Sam, please move'." Even when children do not have a lot of spoken language, it helps to connect their behavior to their feelings in this way.

During group time and throughout the day, we remind children about gentle touches and practice gentle touches with our friends. We also teach children how to say no to their friends if something is happening that they don't like. Usually, as children acquire more language and become familiar with the other toddlers, the biting stops.

In the unusual event of a child who bites frequently, we observe the child to identify events that trigger the biting episodes and then develop a plan to help the child stop biting. We will share our observations and plans with you.

Sometimes we ask for help from outside resources like our Public Health Nurse. We cannot tell you the name of the biter or discuss the issues pertaining to any child other than your own. However, we assure you that whenever a child is hurt in our program, we take immediate steps to fix the situation and will let you know if your child was involved.

We are committed to providing safe, warm, nurturing and responsive care. Please share any information or concerns you have that will help us in providing excellent care for your child. We look forward to working together with you. Thank you for entrusting us with the care of your precious toddler.

Sincerely,

Your Toddler Room Teachers

Appendix C-3: Sample resource manual (cont'd)

Understanding Biting Behavior

When there is biting behavior in the classroom it can be upsetting to all involved; the child who was bitten, the child doing the biting, their families, the toddler room teachers, and other children in the room.

Biting occurs most often among toddlers (13 to 24 months old) and should be considered “normal” behavior. Toddlers use their mouths as a tool for exploring their world. They are learning to tell the difference between food and non-food items. Many of their teeth are in, and they are starting to use words for the first time. They may also be getting new teeth. Toddlers who bite may be trying to get a point across when they don’t expect their words to work, or they may simply be expressing frustration. Toddlers sometimes also bite from loneliness and anxiety or a need for personal space.

Children who hurt others need understanding, support, and kindness most when they behave in a very unlovable way. Adults sometimes feel that they will be rewarding hurtful behavior if they tend to the biter as well as the child bitten, but this is an adult viewpoint. Children are not interested in hurting others. They appreciate understanding and compassion when they have shown their more troubled feelings. It is important to understand the whole child rather than focusing on the one behavior. Biting, like all repetitive aggressive behavior, is often the result of a child’s attempt to communicate.

In the toddler room we try to reduce the risk of biting by creating a calm and caring environment. Over-stimulation, because of crowded spaces or high noise levels, can contribute to stress in children and increase biting. One study found most bites occur early in the day or late in the afternoon. Children may be especially tired at these times and lose some self-control. You can help your toddler adjust to the transition from home to child care and child care to home by taking a few minutes to make these transitions peaceful and calm and by establishing routines and rituals.

Appendix C-3: Sample resource manual (cont'd)**If Biting is a Concern**

One way you can help is by reinforcing the classroom activities at home. You can teach acceptable ways to express frustration when your child “acts out” at home. You can play picture games of things that are okay to bite and those that are not. You can use children’s books to help teach positive social behavior. Your local library is a great source of picture books, showing feelings with simple words, that help a toddler understand their feelings and the effect biting has on others.

When to Seek help

Please let us know if you have any concerns about your child’s behavior. We will let you know of any troubling behaviors we see in the classroom and work with you in developing a plan. Our Public Health Nurse is available to help with those plans.

You might also discuss your concerns with your health care provider, especially if your child is surprised that biting hurts his friends, your child bites the same child repeatedly, or bites frequently and seems unhappy.

Lenore Rubin, PhD, Child Psychologist, CCHP, 09/08

FOR MORE INFORMATION PLEASE CONTACT:

**Child Care Health Program
Public Health – Seattle & King County
2124 4th Avenue, Suite 400
Seattle, WA 98121
206 296 2770**



Appendix C-4: Post-training evaluation of Child Care Health Program

CHILD CARE HEALTH PROGRAM
A Program of Public Health-Seattle & King County

EVALUATION FORM

Title of workshop/training: _____

Name of presenter/s _____

Location: _____ Date: _____

Center Provider _____ Home Provider _____ Number of children served _____

Why did you decide to attend today's training? (select all that apply)

- Mandatory job requirement
 Convenient date/day of week
 The topic appealed to me
 STARS certificate/hours
 Convenient time of day or length of workshop
 Learn/increase my skills

Please rate the following:

1 = Strongly disagree 5 = Strongly agree

The workshop/training was well organized 1 2 3 4 5

The information was presented in an Understandable and useful way 1 2 3 4 5

The information will help me in my day to day work with children 1 2 3 4 5

I increased my knowledge as a result of attending this workshop 1 2 3 4 5

Please rate your knowledge/skills on this topic before attending this workshop/training:

- Excellent/high level
 Good/better than average
 Average/some knowledge
 Fair/poor/little knowledge

The three most important messages from this workshop/training are:

- 1.
- 2.
- 3.

How could the presenters improve this workshop?

Is there anything else you would like to tell the presenters?

Do you have any suggestions for future workshop/trainings?

Your feedback is important to us. Thank you for completing this evaluation.

Appendix C-4: Post-training evaluation of Child Care Health Program

CHILD CARE HEALTH PROGRAM
 A Program of Public Health-Seattle & King County
EVALUATION FORM

Title of workshop/training: _____

Name of presenter/s _____

Location: _____ Date: _____

Center Provider _____ Home Provider _____ Number of children served _____

Why did you decide to attend today's training? (select all that apply)

- Mandatory job requirement
- Convenient date/day of week
- The topic appealed to me
- STARS certificate/hours
- Convenient time of day or length of workshop
- Learn/increase my skills

Please rate the following: 1 = Strongly disagree 5 = Strongly agree

| | | | | | |
|---|---|---|---|---|---|
| The workshop/training was well organized | 1 | 2 | 3 | 4 | 5 |
| The information was presented in an Understandable and useful way | 1 | 2 | 3 | 4 | 5 |
| The information will help me in my day to day work with children | 1 | 2 | 3 | 4 | 5 |
| I increased my knowledge as a result of attending this workshop | 1 | 2 | 3 | 4 | 5 |

Please rate your knowledge/skills on this topic before attending this workshop/training:

- Excellent/high level
- Good/better than average
- Average/some knowledge
- Fair/poor/little knowledge

The three most important messages from this workshop/training are:

- 1.
- 2.
- 3.

How could the presenters improve this workshop?

Is there anything else you would like to tell the presenters?

Do you have any suggestions for future workshop/trainings?

Your feedback is important to us. Thank you for completing this evaluation.

Appendix C-5: Child care consultation literature review

An increasing number of children are being cared for outside of their homes on a regular basis. The National Research Council (2000) reports that 44 percent of infants under the age of 1 receive non-parental child care, and that this number increases with every passing year of life, with 70 percent of 4-year-olds reported as receiving non-parental care. With so many children receiving out-of-home care, the need for high quality child care is critical. High-quality care for young children can enhance early development and learning, and one of the most important features of a high quality environment is the presence of secure relationships. Close relationships with early caregivers give children a secure base from which to explore and learn about their world and themselves, as well as being the basis for early social-emotional competence. Secure, socially competent children are more likely to be confident, friendly, have good peer relationships, and persist at challenging tasks.

Participation in early child care has been linked to higher rates of challenging behavior in children, especially for children enrolled in lower quality programs that place little or no emphasis on addressing the social development needs of children (Frede et al., 2007). Early behavior problems have been shown to be associated with challenging behavior later in life, such as delinquency, aggression, antisocial behavior, and substance abuse (Block et al., 1988). A more immediate risk for young children with challenging behaviors is what can happen when child care providers aren't prepared or equipped to deal with such challenges. A nationwide survey of 4,000 preschool classrooms revealed that young children were being expelled from pre-kindergarten programs at a rate that was three times higher than that of expulsion in the K-12 system (Gilliam, 2005). The range of expulsion in classrooms was 0-24 per 1,000, with a weighted national average of 6.7 per 1,000. Child care providers list coping with challenging behaviors as their highest need for training, technical assistance, and support, and find the most challenging work is with children who exhibit behavioral and/or emotional problems (Alkon et al., 2003).

Mental health consultation has been used as a strategy to affect expulsion rates by reducing the rates of problem behavior and increasing the pro-social skills of target children in child care programs. Cohen and Kaufmann (2005), define early childhood mental health consultation as a "problem-solving and capacity-building intervention implemented within a collaborative relationship between a professional consultant with mental health expertise and one or more individuals, primarily child care center staff or parents with other areas of expertise or knowledge of the child". An important goal of mental health consultation is to improve the abilities of staff, families, and programs to prevent, identify, and reduce the impact of mental health or behavioral problems in young children. Cohen & Kauffman emphasize that the goal of mental health consultation is not to "rescue" child care staff, but instead to coach staff to improve their understanding of a mental health perspective and incorporate it into their work in order to foster learning and promote the social, emotional, and behavioral development of children (2005).

Appendix C-5: Child care consultation literature review (cont'd)

Early childhood mental health consultation has been shown to have positive effects on children and staff alike. Consultation with programs has been shown to reduce challenging behaviors such as aggression toward other children, severe temper tantrums, and extreme withdrawal, as well as increasing pro-social behaviors such as Positive social interaction between children, age-appropriate emotional regulation (Perry et al., 2008; Green et al., 2003). Additionally, in a study by Perry et al. (2008), the majority of children who were at imminent risk for expulsion were not removed from their child care setting following mental health consultation to their program. Research has demonstrated an increase in teacher competencies as a result of mental health consultation, such as increased teacher report of their own self-efficacy and lower staff turnover rates following program consultation (Alkon et al., 2003). Additionally, Alkon et al. reported a qualitative shift in teacher's attitudes about themselves and their work as a result of mental health consultation (2003). Participating teachers reported positive changes in their care of children, greater feelings of responsibility and control of their work, and more empathy and curiosity regarding the causes of children's challenging behaviors. Staff members also reported that they gained skills in observation, reflection, and planning, and that they noticed overall program quality changes after receiving mental health consultation, including greater staff communication and teamwork.

Few studies have examined which aspects of mental health consultation are associated with increased positive results. According to the literature, three characteristics that appear to have an impact on child and staff outcomes are intensity of mental health consultation, quality of relationship between consultant and program staff, and the type of consultation activity conducted. In the area of intensity, increased duration of mental health consultation is associated with positive outcomes. Research has shown that program quality is not immediately affected by the initiation of consultation services, rather it improves after a period of time. Alkon and her colleagues (2003), for example, found that when early childhood mental health consultants provided services to child care programs for a year or more, that staff experienced greater reductions in work-related stress. Another study of an intervention involving a health consultant in child care centers showed positive changes in center compliance with health and safety standards after a 7-month intervention (Alkon & Sokal-Gutierrez, 2002). Increased frequency of consultation activities has also been shown to have positive effects on child care staff. Green et al. (2006) found that early childhood mental health consultants who engaged in more frequent consultation services were perceived by staff to be more effective in reducing behavioral problems.

The intensity of consultation services is directly linked to another important characteristic of effective mental health consultation: the quality of relationships between consultants and child care staff. Green et al. (2003) found that early childhood mental health consultants who worked with programs for extended periods of time were better able to build coaching and mentoring relationships with staff. While the intensity of services required to develop positive relationships is difficult to determine and has not been specifically stated in the literature, it is

Appendix C-5: Child care consultation literature review (cont'd)

clear that this is an important component of an effective mental health consultation model. When asked what the most outstanding, effective parts of their mental health services were, program staff consistently cited the positive qualifications and personal attributes of the consultant as the most essential characteristic. Further, the more positive the relationships between staff members and consultants in a program, the more likely the staff members were to report that the services were effective and helped them feel supported in their work (Green et al., 2003).

The last characteristic of mental health consultation that has been shown to be associated with effectiveness is the type of consultation activity conducted by the mental health professional. Two types of mental health consultation have been distinguished in the literature: child- (individual) level consultation and program-level consultation. Child-level consultation are services in which the consultant focused their intervention efforts towards an individual child, either with the child directly (screening, assessment, referrals, therapy, etc.) or through work with the provider to develop strategies to manage a child's challenging behavior or support their development (Green et al., 2006). Program-level consultation focuses on improving the overall quality of the program and often takes a preventive perspective towards dealing with challenging behaviors. Consultants help programs develop strategies to improve the overall quality of care and meet whole-program objectives through trainings, staff development, and support (Cohen and Kauffman, 2005). Research has shown that consultation models that utilize a combination of these two approaches are more effective in supporting staff. Green et al. (2006) found that high levels of both types of activities by a consultant were associated with increased reports of staff wellness, and the more likely staff members were to perceive the consultation services as beneficial to them. Out of all the services provided by mental health consultants, child care staff in a 2005 study (Cohen and Kauffman) reported that the activities they found most helpful to support them in caring for children with challenging behaviors were individual on-site consultation with a mental health expert, workshops on behavior management strategies, and written materials on behavior management strategies.

Alkon, A. & Sokal-Gutierrez, K. (2002). Child care health consultation improves health knowledge and compliance. *Pediatric Nursing*, 28(1), 61 – 65.

Alkon, A., Ramler, M. & MacLennan, K. (2003). Evaluation of mental health consultation in child care centers. *Early Childhood Education Journal*, 31(2), 91-99.

Block, J., Block, J.H. & Keyes, S. (1988). Longitudinally foretelling drug usage in adolescence: Early childhood personality and environmental precursors. *Child Development*, 59, 336-355.

Cohen, E. & Kaufmann, R. (2005). *Early Childhood Mental Health Consultation*. DHHS Pub. No. CMHS-SVP0151. Rockville, MD: Center for Mental Health Services, Substance Abuse and Mental Health Services Administration.

Appendix C-5: Child care consultation literature review (cont'd)

Cohen, E. & Kaufmann, R. (2005). *Early Childhood Mental Health Consultation*. DHHS Pub. No. CMHS-SVP0151. Rockville, MD: Center for Mental Health Services, Substance Abuse and Mental Health Services Administration.

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